

## Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	2fb53162-0301-4019-acb2-6d7fbd944bb2
2	Name of customer	GULSHAN
3	Address	Auto driving, Aicher greater noida, Ivory hospital,GAUTAM BUDDHA NAGAR,Uttar Pradesh,201310
4	Address with Landmark (Address enhancements as the executive reached the shop)	NA
5	Name of Person Met	NA
6	Relationship	NA
7	Ownership of Office	NA
8	If Rented (Monthly Rent (O))	
9	Area Locality	NA
10	Name Plate / Address plate - Available	No
11	Years at current office	NA
12	Office Type	Shop in Residential Area
13	Visit Lat Long	28.4669 , 77.5387
14	Number of Employees	NA
15	Neighbour Check	NA
16	Merchant Name	GULSHAN
17	Contact Number	7983382235
18	Final Status	Return
19	Detailed Final Remarks/Comments	NO LANDMARK AND HOSPITAL AVAILABLE AT THE LOCATION AND APPLICANT WAS NOT PICKING THE CALL.
20	GPS Location	FG8Q+MJ2, Masjid Rd, Accher, Pi I & II, Eachachhar, Greater Noida, Uttar Pradesh 201315, India

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Shop front photo with full vertical viewpoint i.e; shop board, sealing, entrance, ground on which the shop is established (cemented, pilers, bricks, stands, mud, wheels etc.)



23

Take Photo of Person Met Inside the Shop



24

Take Photo of QR  
Code/Soundbox/EDC  
Machine



25

Shop front with horizontal  
view covering the left &  
right of the shop  
establishing if the shop is  
an individual structure, in  
a marketplace, highway,  
isolated place, in a cluster  
framework.



26

Shop inside with inventory photos establishing that the inside is of the same shop where the front photo was taken



27

Neighbourhood photo of the shop



**Important - Mandatory to be filled**

1	Date and Time of Visit	17-02-2026 14:49:59
2	Name of the person doing Field Verification(FV)	AMIT KUMAR

3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Anuj Sharma

