

Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	2b25ea73-22b0-4bc5-85bb-89f6571eaf06
2	Name of customer	LAXMI KUMARI
3	Address	Brahmasthan, saidpur,,SARAN,Bihar,841101
4	Address with Landmark (Address enhancements as the executive reached the shop)	Brahmasthan, saidpur,,SARAN,Bihar,841101
5	Name of Person Met	Anup kumar
6	Relationship	Family Member
7	Ownership of Office	Own
8	If Rented (Monthly Rent (O))	
9	Area Locality	Residential
10	Name Plate / Address plate - Available	Yes
11	Years at current office	3
12	Office Type	Shop in Residential Area
13	Visit Lat Long	25.7217 , 85.1192
14	Number of Employees	0-2
15	Neighbour Check	Yes
16	Merchant Name	LAXMI KUMARI
17	Contact Number	6204075833
18	Final Status	Positive

19	Detailed Final Remarks/Comments	WE VISITED THE REGISTERED ADDRESS AT BRAHMASTHAN, SAIDPUR,,SARAN,BIHAR,841101 ON 24-02-2026 17:12:44. ADDRESS FOUND. WE MET WITH APPLICANT'S FAMILY MEMBER ANUP KUMAR AT THE LOCATION. NATURE OF BUSINESS IS FAST FOOD / CHAAT STALL. APPLICANT HAS BEEN RUNNING THE BUSINESS AT THE LOCATION FOR 3 YEARS. THE AREA IS RESIDENTIAL. THE PREMISE TYPE IS OWN. A PAYTM PAYMENT QR CODE SEEN AT THE SHOP. ENQUIRIES MADE FROM THE SURROUNDING AREA CONFIRMED THAT THEY KNOW THE APPLICANT.
20	GPS Location	saidpur brahamsthan, P4C9+MQF, Chausiya, Bihar 841101, India

21	Take Photo if Name Plate / Address plate – Available	
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22

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	24-02-2026 17:12:44
2	Name of the person doing Field Verification(FV)	ABHISHEK KUMAR
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Anuj Sharma

