

## Field Verification Report(FVR)

| Sr. No. | Question   | Answer   |
|---------|--|--|
| 1       | Order Number/ Case Identifier  | 6b6ec7cb-2ecb-44b7-a072-459c6c7abcb1   |
| 2       | Name of customer   | HABIB LIYAKAT KUDACHI  |
| 3       | Address  | Shop 1, Shamrav patil bhajipala market, Bail Bazar rood malkapur,Sangli,Maharashtra,415110 |
| 4       | Address with Landmark (Address enhancements as the executive reached the shop) | Shop 1, Shamrav patil bhajipala market, Bail Bazar rood malkapur,Sangli,Maharashtra,415110 |
| 5       | Name of Person Met   |  |
| 6       | Relationship   |  |
| 7       | Ownership of Office  |  |
| 8       | If Rented (Monthly Rent (O))   |  |
| 9       | Area Locality  |  |
| 10      | Name Plate / Address plate - Available   |  |
| 11      | Years at current office  |  |
| 12      | Office Type  |  |
| 13      | Visit Lat Long   | 0.0000 , 0.0000  |
| 14      | Number of Employees  |  |
| 15      | Neighbour Check  |  |
| 16      | Merchant Name  | HABIB LIYAKAT KUDACHI  |
| 17      | Contact Number   | 9595607123   |
| 18      | Final Status   | Return   |
| 19      | Detailed Final Remarks/Comments  | NON FEASIBLE   |
| 20      | GPS Location   |  |



**Important - Mandatory to be filled**

|   |   |                       |
|---|---|-----------------------|
| 1 | Date and Time of Visit                          | 26-02-2026 13:52:00   |
| 2 | Name of the person doing Field Verification(FV) |                       |
| 3 | Name of External Agency                         | RNFI SERVICES LIMITED |
| 4 | Name of Checker for FV Report                   | Anuj Sharma           |

