

Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	860991a0-60b4-46e5-99d8-d60b93b10b7b
2	Name of customer	LUTAN KUMAR RAY
3	Address	stitching shop,v9 village walllbara ,bala ji medical,ambika,Gujarat,394248
4	Address with Landmark (Address enhancements as the executive reached the shop)	stitching shop,v9 village walllbara ,bala ji medical,ambika,Gujarat,394248
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	LUTAN KUMAR RAY
17	Contact Number	9023797264
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	10-03-2026 10:42:00
---	------------------------	---------------------

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

