

## Field Verification Report(FVR)

| Sr. No. | Question   | Answer   |
|---------|--|--|
| 1       | Order Number/ Case Identifier  | d199490e-7ede-4666-8b5a-8f81eebd403d   |
| 2       | Name of customer   | CHANDRAPPA ANANDA KUMAR  |
| 3       | Address  | #8/9,munireddy bulding, Kudanahalli gate, Kundanahalli gate signal,BENGALURU URBAN,Karnataka,560037                |
| 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   | 12.9566 , 77.7145  |
| 14      | Number of Employees  | NA   |
| 15      | Neighbour Check  | NA   |
| 16      | Merchant Name  | CHANDRAPPA ANANDA KUMAR  |
| 17      | Contact Number   | 7337761588   |
| 18      | Final Status   | Return   |
| 19      | Detailed Final Remarks/Comments  | NO LANDMARK AVAILABLE AND APPLICANT WAS NOT PICKING THE CALL   |
| 20      | GPS Location   | bus stop, 149, ITPL Main Rd, opposite of BEML Layout, BEML Layout, Brookefield, Bengaluru, Karnataka 560037, India |

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                          | 21-03-2026 13:20:45 |
| 2 | Name of the person doing Field Verification(FV) | THANUSH S RAO       |

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

