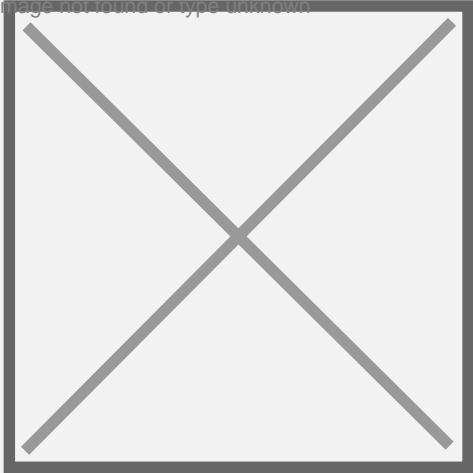
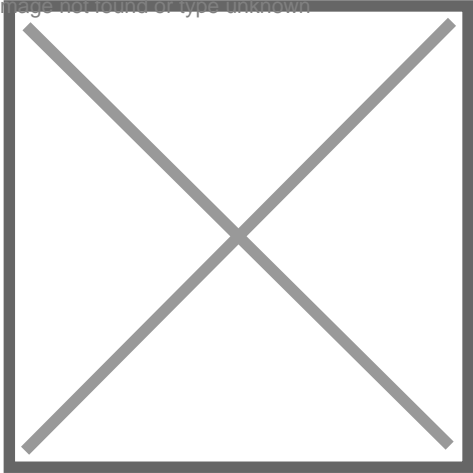
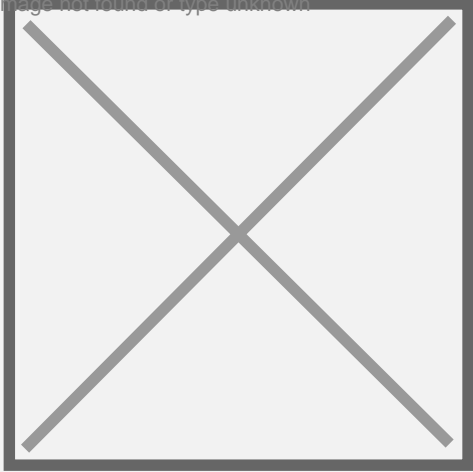
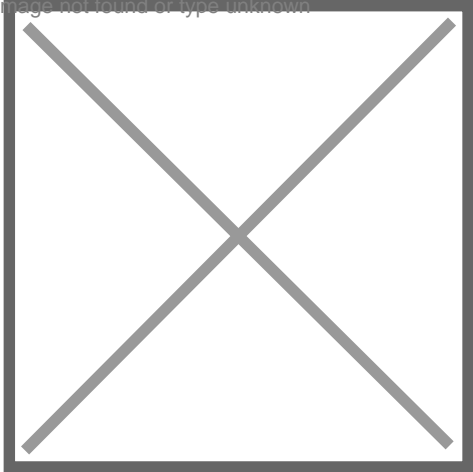
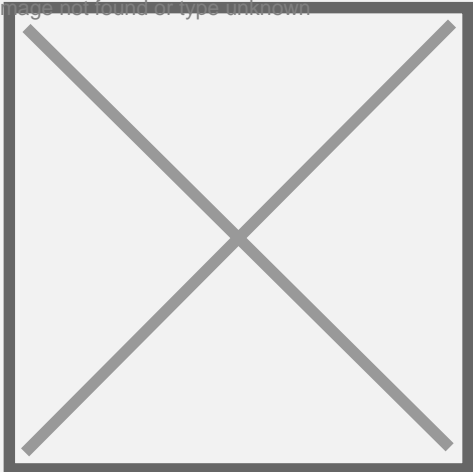


Field Verification Report(FVR)

Sr. No.	Person conducting Field Verification to fill/strike off relevant fields	
1	Business Name	SHRINATHJI MEDICAL & GENERAL STORES
2	Customer Name / Customer Code	9401034809
3	Address	1 165 NAGAVEKAR HOSPITAL, NEAR KANKAVLI VIDYAMANDIR KANKAVKI SINDHUDURG 416602
4	Name of the Person met	N/A
5	Designation of the Contacted Person in that Firm	N/A
6	Address Findings	N/A
7	Business Premises owned or rental	N/A
8	Number of years in Business	NA
9	Merchant Premises is in residential or commercial building	N/A
10	Nature Of Goods sold or services given at merchant location	N/A
11	Level of Stock/Inventory seen at merchant location (Good/Average/Nominal)	N/A
12	Number of Employees at the merchant location	NA
13	Mswipe Machine/QR seen or not	N/A
14	Merchant Neighbour Name	N/A
15	Neighbour feedback on merchant	N/A
16	Business Premise Size	N/A
17	Business Board seen (Yes/No)	N/A
18	Investigating officials comment/conclusion about address and name board sighted	NOT SERVICEABLE
19	GPS Location	NA

20	Fv Status	Negative
21	Negative reason	NA
22	Gist of Discussions	N/A
23	Device Pic	
24	Name Board	
25	Inside of the Shop	

26	Outside of the Shop	<p>Image not found or type unknown</p> 
27	Merchant Photo	<p>Image not found or type unknown</p> 

Important - Mandatory to be filled

1	Date and Time of Visit	31-03-2026 11:55:00
2	Name of the person doing Field Verification(FV)	N/A
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Rajesh Massey
5	* Overall opinion on the account activity.	
5	Reference Number	REF88316

