

## Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	cd45944c-4532-4c27-acc9-b09e5763f6df
2	Name of customer	TUKARAM SHRIMANT BODHE
3	Address	Shop no 1 ghar no 874, shriram nagar ambethan, Ambethan chakan, Shriram nagar ambethan,PUNE,Maharashtra,410510
4	Address with Landmark (Address enhancements as the executive reached the shop)	
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	TUKARAM SHRIMANT BODHE
17	Contact Number	8605765309
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	08-04-2026 14:52:00
2	Name of the person doing Field Verification(FV)	
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Rajesh Massey

