


Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	6351a424-49bf-4743-a08d-d9cad6c2df88
2	Name of customer	GURUVILLI ANIL
3	Address	C1-A, Chilakapalem ponduru road, Varam Medicals,SRIKAKULAM,Andhra Pradesh,532410
4	Address with Landmark (Address enhancements as the executive reached the shop)	C1-A, Chilakapalem ponduru road, Varam Medicals,SRIKAKULAM,Andhra Pradesh,532410
5	Name of Person Met	Gulivilli Anil
6	Relationship	Self
7	Ownership of Office	Own
8	If Rented (Monthly Rent (O))	
9	Area Locality	Residential
10	Name Plate / Address plate - Available	No
11	Years at current office	3
12	Office Type	Shop in Residential Area
13	Visit Lat Long	18.2712 , 83.8034
14	Number of Employees	0-2
15	Neighbour Check	Positive
16	Merchant Name	GURUVILLI ANIL
17	Contact Number	9963175245
18	Final Status	Positive

19	Detailed Final Remarks/Comments	WE VISITED THE REGISTERED ADDRESS AT C1-A, CHILAKAPALEM PONDURU ROAD, VARAM MEDICALS, SRIKAKULAM, ANDHRA PRADESH, 532410 ON 21-04-2026 18:08:08. ADDRESS FOUND. , AND THE APPLICANT , GURUVILLI ANIL WAS MET AT THE LOCATION. NATURE OF BUSINESS IS VEGETABLE STALL. HE CONFIRMED THAT HE HAS BEEN RUNNING THE BUSINESS AT THE LOCATION FOR 3 YEARS. THE AREA IS RESIDENTIAL. THE PREMISE TYPE IS OWN. A PAYTM PAYMENT QR CODE SEEN AT THE SHOP. ENQUIRIES MADE FROM THE SURROUNDING AREA CONFIRMED THAT THEY KNOW THE APPLICANT.
20	GPS Location	3-125,nain street,etcherla,chikapalem, Chilakapalem, Andhra Pradesh 532410, 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.)	
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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	21-04-2026 18:08:08
2	Name of the person doing Field Verification(FV)	GALI RAMANA REDDY
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Anuj Sharma

