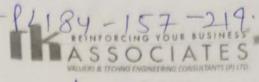
|                    | U191 5002 - 241 - PI | - |
|--------------------|----------------------|---|
| File No.           | RKA/DNCR//           | K |
| Date of Receiving  |                      | 1 |
| File Receiver Name | Parun dana           |   |



Acoes 61.84 BASA

### CASE COLLECTION FORM (Version 5.0) Date of implementation: 9.02,2011 | Last Revision: 30.01,2020 | Latest Revision: 31,10,2020

|                | Items                                                                                                          | Assigned To                                                          | Assigned to Date                                      | To be completed by date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Submitted<br>On date                           | Grade                                            | HOD E<br>Signa                        |                    |
|----------------|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--------------------------------------------------|---------------------------------------|--------------------|
| ile Re         | ceived By                                                                                                      | Paun                                                                 | NA                                                    | NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                |                                                  |                                       |                    |
| Survey         |                                                                                                                | Paul gnoma                                                           |                                                       | 14/123                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                |                                                  |                                       |                    |
| repar          | ation                                                                                                          | 1                                                                    |                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                |                                                  |                                       |                    |
| 1              | A - Very Good, I                                                                                               | B - Satisfactory, C                                                  | - Average, D                                          | - Poor, E - Ex                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | tremely Poor                                   |                                                  |                                       |                    |
| ngg.<br>o reas | unprepared due<br>son                                                                                          | properly do representation                                           | ne, D Photo not                                       | erly,  Survey e,  Identificati tographs not taken,  Survey sur                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | clearly taken<br>ner/ owner ren                | rly done, [<br>,                                 | ☐ Measure                             | ement is not       |
| by the         | e File is returne<br>preparer - HOI                                                                            | - Ivillion a                                                         | efects in the                                         | e survey hencer to collect the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | e approved f                                   | or prepar                                        | ration with                           | warning to         |
|                | comment & ture                                                                                                 |                                                                      | fects in the si                                       | urvey. Survey h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nas to be done                                 |                                                  |                                       |                    |
| Signa          | ture                                                                                                           | ☐ Major de                                                           | fects in the si                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nas to be done                                 |                                                  |                                       |                    |
|                |                                                                                                                | ☐ Major de                                                           | fects in the si                                       | urvey. Survey h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nas to be done                                 |                                                  |                                       |                    |
| Signa          | Proposal/ Work                                                                                                 | ☐ Major de                                                           | GENE                                                  | RAL DETAIL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | s to be done                                   | again.                                           |                                       | certificate        |
| Signa<br>1.    | Proposal/ Work<br>Ref. No.                                                                                     | ☐ Major de                                                           | GENE                                                  | urvey. Survey h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s to be done                                   | again.                                           |                                       | certificate        |
| 1. 2. 3.       | Proposal/ Work Ref. No. Type of Service Type of custon                                                         | Order or                                                             | GENE Valuation Rep                                    | urvey. Survey h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | suction cost esti                              | mate,   Col                                      | Cost vetting                          |                    |
| Signa<br>1.    | Proposal/ Work Ref. No. Type of Service                                                                        | Order or  e  ner  anization                                          | GENE Valuation Rep Other CE Cer Bank Company          | errey. Survey h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | uction cost esti                               | mate,   Col                                      | Cost vetting                          |                    |
| 1. 2. 3.       | Proposal/ Work Ref. No. Type of Service Type of custon Bank/ FI/ Orga                                          | Order or  e  mer  anization ess                                      | GENE Valuation Rep Other CE Cer Bank Company          | Constructificates, Deprivate of Decretary Decr | uction cost estive Report, Discontact Number   | mate,  IE Colrect client                         | Cost vetting rporate through Ba       | ank<br>I Id        |
| 1. 2. 3. 4.    | Proposal/ Work Ref. No. Type of Service Type of custon Bank/ FI/ Orga Name & Addre                             | Major de  Order or  e  ner  anization ess  nt Officer/ party Details | GENE Valuation Reporter CE Cer Bank Company  NB NB    | Constructificates, Description Private of Construction Construction Description Construction Description Construction Description Description Construction Description Descrip | iction cost esti V Report,  NBFC Client  Di    | mate,  IE Colrect client                         | Cost vetting rporate through Ba       | ank                |
| 1. 2. 3. 4.    | Proposal/ Work Ref. No. Type of Service Type of custon Bank/ FI/ Orga Name & Addre Case Allotmer               | Major de  Order or  e  ner  anization ess  nt Officer/ party Details | GENE Valuation Reporter CE Cer Bank Company NB N Name | Constructificates, Description Private of Construction Construction Description Construction Description Construction Description Description Construction Description Descrip | uction cost estivent Report, Laborated Number  | mate, □ Collect Client                           | Cost vetting rporate through Ba Emai  | ank<br>I Id        |
| 1. 2. 3. 4. 5. | Proposal/ Work Ref. No. Type of Service Type of custon Bank/ FI/ Orga Name & Addre Case Allotmer Fees paying p | Order or  e  ner  anization ess nt Officer/ party Details            | GENE Valuation Reporter CE Cer Bank Company NB N Name | Constructificates, Derivate of December 1980  Constructificates, December 1980  Constructifi | uction cost estivent Report, Laborated Number  | mate,   IE  Contract client                      | Cost vetting rporate through Ba  Emai | ank  Ild  I O Inb. |
| 1. 2. 3. 4. 5. | Proposal/ Work Ref. No. Type of Service Type of custom Bank/ FI/ Orga Name & Addre Case Allotmer Fees paying p | Order or  e  ner  anization ess nt Officer/ party Details            | GENE Valuation Reporter CE Cer Bank Company Name Name | Constructificates, Derivate of PSU Derivate of Private of Private of Private of Private of Private of Private of Psu Derivate  | uction cost estivent Report, Discontact Number | mate,  IE Contract client  Take for eximple 1998 | Cost vetting rporate through Ba  Emai | Ild I O Inb.       |

Page 1 of 15

|     |                                                                                     | CASE DETA                                                                                                               | ILS                                                                                                                     |                                                               |
|-----|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| 1.  | Type of Property                                                                    | 188                                                                                                                     |                                                                                                                         |                                                               |
| 2.  | Purpose of Valuation/<br>Assignment                                                 | Periodic Re-Valuation for                                                                                               | e asset for creating new coll<br>or Bank, □ Distress sale for<br>pose, □ Capital Gains Wealt<br>eneral Value Assessment | NPA A/c.,                                                     |
| 3.  | Owner/ Applicant Details .                                                          | Name                                                                                                                    | Contact Number                                                                                                          | Email Id                                                      |
| 0.  | M                                                                                   | Is Marcul No                                                                                                            | ndan ouvereas 4                                                                                                         | 4.                                                            |
| 4.  | Account Name                                                                        | 115 Movent 1                                                                                                            | Jondon Ouerstead                                                                                                        | Hd.                                                           |
| 5.  | Property Address                                                                    | Fun Valley, ma                                                                                                          | wird Highway,                                                                                                           | + Dehradhun                                                   |
|     |                                                                                     | Havidwar Nal                                                                                                            | ficted High Way,                                                                                                        | Vargana, Paus                                                 |
| 6.  | Who will coordinate on site for the site survey                                     | DADA TONAME                                                                                                             | ( Riveron 98970                                                                                                         | tact Number                                                   |
| 7.  | Preferred time of survey                                                            | Date 1417/2                                                                                                             | 3 Time                                                                                                                  | : 30 A.M                                                      |
| 8.  | Documents Received (Any one ownership document and approved site plan/ map is must) | □ Registered Will, □ R □ Conveyance Deed, □ 2. Map: □ Cizra Map, □ 3. Utility Bills: □ Electric receipt, □ House Tax of |                                                                                                                         | nsfer Deed,<br>ssion Letter  Water Bill & paymen              |
| 9.  | Documents received from                                                             | -Bank                                                                                                                   |                                                                                                                         |                                                               |
| 10. | Special Instructions if any:                                                        | Bonk                                                                                                                    |                                                                                                                         |                                                               |
| 11. | on Valuer firm to distort any                                                       | nentioned above for the prepara<br>of facts and would not try to infli<br>it any individual or organization             | ation of Valuation Report. I agree<br>uence any member or official of<br>by any means illegitimately                    | e that I'll not put pressure<br>the firm in the ill spirit or |

|            | 1.01     | 200   |      | 0.   | 0    |        |     |
|------------|----------|-------|------|------|------|--------|-----|
|            | WAIDNER/ | 10000 | -4)- | 12/9 | ZY - | - 57-2 | 19. |
| File No. R | KA/DNCR/ |       |      |      |      |        | 1/  |

|       | FILE RECEIVER CASE COLLECTION PROCESS COMPLIANCE CHECKLIST (To be filled by Surveyor)                                           |        |                                                  |  |  |  |  |
|-------|---------------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------|--|--|--|--|
| S.NO. | COMPLIANCE CHECKLIST                                                                                                            | STATUS | APPROVER SIGNATURE/<br>REMARKS IN CASE OF ANY (X |  |  |  |  |
| 1.    | Is Case collection Form properly filled by Receiver?                                                                            | W      |                                                  |  |  |  |  |
| 2.    | Is purpose of the assignment understood clearly by the receiver?                                                                |        |                                                  |  |  |  |  |
| 3.    | Has receiver checked if this is a new case or existing case of the Bank?                                                        |        |                                                  |  |  |  |  |
| 4.    | Has receiver fixed the fees with the manager/ client and sent quotation properly or have taken approval of the work over email? | 4      |                                                  |  |  |  |  |
| 5.    | Has receiver taken proper Work Order/ Email/<br>CESA form formality?                                                            |        |                                                  |  |  |  |  |
| 6.    | In case of private case or for fresh case 50% advance is received?                                                              | Z      |                                                  |  |  |  |  |
| 7.    | Is document checklist email sent to the customer?                                                                               | 2      |                                                  |  |  |  |  |
| 8.    | Has the received documents is having 'documents provided by stamp'?                                                             | Ø      |                                                  |  |  |  |  |

### IMPORTANT INSTRUCTIONS TO SURVEYOR

| 1.  | Please fill the above compliance checklist before moving for the survey.                                                                                                                                                                                                                                                                                                                                                                                                              |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2.  | Please do not do the survey if you do not have proper documents.                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 3.  | For Vacant Plot/ Land - Cizra Map/ Master/ Zonal/ Site Plan is must to identify the Plot. For Agriculture or converted land from agriculture - Mutation documents, CLU is must.                                                                                                                                                                                                                                                                                                       |
| 4.  | Firstly please first study the documents of the property which needs to get surveyed.                                                                                                                                                                                                                                                                                                                                                                                                 |
| 5.  | Mark the Owner/ Area/ Boundaries mentioned in the ownership documents with bold florescent marker pen before moving for the survey. During site survey if any difference is found in the above fields from the ownership documents then please contact the owner immediately to know the reason for the difference.                                                                                                                                                                   |
| 6.  | Confirm ongoing property rates in the subject location through public domain, property sites and contact dealers to show you the available properties in that area during your survey.                                                                                                                                                                                                                                                                                                |
| 7.  | Identify the Property clearly by matching the boundaries and area mentioned in the property                                                                                                                                                                                                                                                                                                                                                                                           |
| 8.  | Do sample physical or google measurements of the property.                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 9.  | PHOTOGRAPH INSTRUCTIONS:  a. Take owner/ representative photograph along with the property.  b. Take your selfie along with the property and the owner/ representative.  c. Take full scale photo of the property with gate.  d. Take photo of the property along with abutting road, towards left, right and center.  e. Take multiple photos of inside-out of the property.  f. Take nearby photographs of the Property.  g. Take a short video to cover property and neighborhood. |
| 10. | Take Google Map location.  Check main road name & width and approach road width and distance of property from main road.                                                                                                                                                                                                                                                                                                                                                              |
| 11. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 12. | Check Jurisdiction Municipal Limits & Ward Name.  Check Jurisdiction Municipal Limits & Ward Name.  Fill each column of survey form diligently in detail and tick the appropriate option clearly.                                                                                                                                                                                                                                                                                     |
| 13. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 14. | Check any defects or negativity in the property and comments.  Do extensive market rate enquiries and confirm for any recent past transactions.  Do extensive market rate enquiries and confirm for any recent past transactions.                                                                                                                                                                                                                                                     |
| 15. | Do extensive market rate enquiries and confirm for any recent past transactions.  In case customer appears to be providing misleading information to you or trying to influence you be money or cash then immediately report to the Management & Bank.                                                                                                                                                                                                                                |

| GRADE | SURVEY GRADING MATRIA  PARAMETERS/ CRITERIA  PARAMETERS/ CRITERIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A     | <ol> <li>In case all the points below are done properly, timely with full care and an extension of payment.</li> <li>Survey started with proper work order and knowing the source of payment.</li> <li>Survey done with proper documents.</li> <li>Done complete homework and studied the documents properly with highlighting the main points before moving for the survey.</li> <li>Chosen correct survey form as per the property type.</li> <li>All fields of Survey form are properly filled.</li> <li>All site special observations and negative and positive factors are clearly mentioned.</li> <li>Self &amp; client signatures taken on survey form.</li> <li>Property rates information properly taken, mentioned and verified.</li> <li>Site rough sketch plan made.</li> <li>Proper photographs taken.</li> <li>Selfie with property taken.</li> </ol> |
| В     | In case of 3 minor mistakes in any of the above points except Point 1, 2, 3, 4, 6, 8, 10, 11, 12 but all the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|       | In case of more than 3 minor mistakes and any 1 major mistake in any of the above points and if any points are completely missing except Point 1, 2, 3, 4, 6, 8, 10, 11, 12.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| n     | In case of 1 major mintake or missing of any 1 point out of 1, 2, 3, 4, 6, 8, 10, 11, 12.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| E     | In case of more than 1 major mistakes or missing of more than 1 point out of 1, 2, 3, 4, 6, 8, 10, 11, 12.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### Note (Survey Grading Matrix):

- 1. For special assignments like LIE, Stock Valuation, etc. where till date survey format is not specified or released, in such cases point wise site observation report has to be submitted by the Surveyor duly signing it properly. Without signed Site Observation report, Point 4 will be considered as not done and will fall under Category E.
- 2. Similar Grading Matrix is issued for Case Collection & Report Preparation as well.

### Note (Overall Grading Matrix):

1. In case client reports any careless mistake in the report for which revision has to be done in the report then in that case Grading Matrix may be revised and Grade E will be awarded.

|             | SURVEY PROCESS COMPLIANCE CHECKLIST                                                                                                                                       |          |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 110         | (10 be submitted by Surveyor with each Survey)                                                                                                                            |          |
| NO.         | COMPLIANCE CHECKLIST POINTS                                                                                                                                               | STATUS   |
| ١.          | Did you take proper property documents to carry out the survey?                                                                                                           | ar.      |
| 2.          | have you properly studied & highlighted Owner/ Area/ Boundaries in the property                                                                                           | A        |
| 3.          | documents with bold florescent before moving for the survey?  Did you check prominent landmark nearby the subject property and mentioned in the survey form?              | J        |
| 4.          | Did you identified the Property clearly by matching the boundaries and area mentioned in                                                                                  |          |
| 5.          | Did you check if property is merged with any other property or it is an independent                                                                                       | -0       |
| 6.          | Did you do sample physical or google measurements of the property in case of property more than 2500 sq.mtr?                                                              | The same |
| 7.          | Did you check for any building violations in the property?                                                                                                                | 64       |
| 3.          | Did you check not any ballang tradiction/ ward?                                                                                                                           | U        |
| 9.          | Did you take Google Map location and shared it to Maps whatsapp group?                                                                                                    | W        |
| 10.         | Did you check Main road name & width and its distance from the subject property?                                                                                          | 1        |
| 11.         | Did you check approach Lane width on which property is located?                                                                                                           | UT       |
| N. I. A. V. | Have you taken property full scale photograph with gate?                                                                                                                  | -        |
| 2.          | Have you taken owner/ representative photograph with the property?                                                                                                        | 4        |
| 13.         | Have you taken owner/ representative?  Have you taken your selfie with the property along with owner/ representative?                                                     | J.       |
| 14.<br>15.  | Have you taken photograph of the property along with abutting road and towards left and right of the property?                                                            | 1        |
| 10          | Have you taken multiple photographs of the property from inside-out?                                                                                                      | 9        |
| 16.<br>17.  | Did you check nearby development and whereabouts and commented on survey form?                                                                                            | 9        |
| 18.         | Did you check any defects or negativity in the property in terms of location, legality, disputes, marketability, salability, etc. and commented on survey form in detail? |          |
| 19.         | Have you filled all the columns of survey form including survey summary sheet properly?                                                                                   |          |
| 20.         | Did you draw site key plan (location map)?                                                                                                                                | 1        |
| 21.         | Did you draw rough site sketch plan?                                                                                                                                      | d        |
| 22.         | Have you taken self-attested documents from owner/ representative and stamped "documents provided by stamp"?                                                              |          |
| 23.         | Did you check any defects or negativity in the property in terms of location, legality, disputes, marketability, salability, etc. and commented on survey form in detail? |          |
| 24.         | Have you confirmed any recent past transactions during market enquiries and                                                                                               |          |
| 25.         | Did you take signatures of the owner/ representative on undertaking and survey summary sheet?                                                                             |          |
| 26.         | Did you signed the undertaking?                                                                                                                                           |          |

| For File No.  | UIS (2023-24) -PL 184-157-21 |
|---------------|------------------------------|
| Surveyor Name | Paruen Shaopaa.              |
| Signature     | 1417103 Joule                |
| Date          | 11111122                     |

GENERAL SURVEY FORM

(FOR PROPERTIES OTHER THAN FLATS)

(Version 5.0)

Date of implementation: 9.02.2011 | Last Revision: 04.01.2018 | Latest Revision: 31.10.2020 VIS (2013-24) - 110-184-187-219
File No. RKA/DNCR/...../ Date: 14/7/23 Time: 1120 AM

|     |                                | GENERAL DETAILS                                                       |
|-----|--------------------------------|-----------------------------------------------------------------------|
| 1.  | Name of the Surveyor           | 0 01 0 01                                                             |
| 2.  | Property shown by              | Cowner P Representative                                               |
|     |                                | locked, survey could not be done from misros                          |
|     |                                |                                                                       |
|     |                                | france Premod how. 989 7042089.                                       |
| 3.  | Survey Type                    | (incide out with measurements & photographs)                          |
|     |                                | Half Survey (Measurements from outside a priotographs)                |
|     |                                | No measurements)                                                      |
| 4.  | Reason for Half survey or only | Possessee dign Lallow to inspect the                                  |
|     | photographs taken              | A NDA property so couldn't be surveyed completely                     |
| 5.  | How Property is Identified     | The separate of the properties mentioned in the deed, E From          |
|     |                                | name plate displayed on the property, Identified by the owner.        |
|     |                                | owner representative Figuired from nearby people,                     |
|     |                                | ☐ Identification of the property could not be done, ☐ Survey was not  |
|     |                                | done                                                                  |
| 6.  | Type of Property               | ☐ Flat in Multistoried Apartment, ☐ Residential House, ☐ Low Rise     |
|     |                                | Apartment,  Residential Builder Floor, Commercial Land &              |
|     | 1 2 7 1                        | Building,  Commercial Office,  Commercial Shop,  Commercial,          |
|     |                                | Floor,   Shopping Mall,  Hotel,  Industrial,  Institutional,   Muddle |
|     |                                | School Building.   Vacant Residential Plot,   Vacant Industrial       |
|     |                                | Plot, - Agricultural Land Fun vally water lank. Ente                  |
| 7.  | Property Measurement           | ☐ Self-measured, ☐ Sample measurement only, ☐ No measurement          |
| 8.  | Reason for no measurement      | ☐ It's a flat in multi storey building so measurement not required    |
|     |                                | ☐ Property was locked, ☐ Owner/ possessee didn't allow it,            |
|     |                                | □ NPA property so didn't enter the property, □ Very Large Property,   |
|     |                                | practically not possible to measure the entire area  Any other        |
|     |                                |                                                                       |
|     |                                | Reason: NA                                                            |
| _   | D                              | ☐ Value assessment of the asset for creating new collateral mortgage  |
| 9.  | Purpose of Valuation           | Periodic Re-Valuation for Bank,  Distress sale for NPA A/c.,          |
|     |                                | ☐ For DRT Recovery purpose, ☐ Capital Gains Wealth Tax purpose        |
|     |                                |                                                                       |
|     |                                | ☐ Partition purpose, ☐ General Value Assessment  ☐ Home Improvement   |
| 10. | Type of Loan                   | ☐ Housing Loan, ☐ Housing Take Over Loan, ☐ Home Improvement          |
|     |                                | Loan,   Loan against Property,   Construction Loan,   Educationa      |
|     |                                | Loan, □ Car Loan, □ Project Loan, □ Term Loan, □ CC Limi              |
|     |                                | enhancement, □ Cash Credit Limit, □ Industrial Loan, □ NA             |
|     | - Amount                       | NA.                                                                   |
| 1.  | oan Amount                     | N T                                                                   |

Not Enterferinmens

Page 6 of 15

| 1.  | Legal Owner Name/s                     | OWNERSHIP                                                                 | DETAILS           |              | 1            |             |                |        |
|-----|----------------------------------------|---------------------------------------------------------------------------|-------------------|--------------|--------------|-------------|----------------|--------|
| 2.  | Property Pro-                          | Director (sh Raj numare S/O Sh Beg Raj                                    |                   |              |              |             |                |        |
| 3.  | Property Purchaser Name MS             | marcul                                                                    | Jonda             | DI DI        | 12496        | as Lto      |                |        |
|     | Property Address under                 | Fun wall                                                                  | My ma             | WZ a h       | rant,        | Dehrad      | un-H           | wigher |
| 4.  | Valuation                              | Fun valley mauza nrant, Dehradun-Harginson National Highway, Teh-Risthart |                   |              |              |             |                |        |
| 4.  | Present Residence Address of           |                                                                           |                   |              |              |             |                |        |
|     | the Owner/ Purchaser                   |                                                                           |                   |              |              |             |                |        |
| 5.  | Property constitution                  | Pree Hold,                                                                | ☐ Lease H         | old          |              |             |                |        |
|     |                                        | LOCATION                                                                  | DETAILS           |              |              |             |                |        |
| 1.  | Adjoining Properties                   | LOCATION<br>East                                                          |                   | est          | Nort         | h           | South          |        |
| ٠.  | (Match it with papers with the help (V | WIDS:                                                                     | A                 |              | Prof.        |             | 111            |        |
|     |                                        | Prodo for                                                                 | -                 | none         |              |             | NH-            | 12     |
|     | also confirm it with nearby people)    | Laxani TOH                                                                | KET III           | robeti       | VIJay        | C 141.      |                |        |
| 2.  | Property Facing                        | ☐ East Facing                                                             |                   | acing, 🗆 \   |              |             | Facing,        |        |
|     | 20. 3. 3.                              | □ North-East F                                                            |                   |              |              |             |                |        |
|     |                                        |                                                                           |                   | 70411 7703   | (   doing, s |             |                |        |
|     |                                        | □ North-West                                                              |                   | 1.           |              |             |                |        |
| 3.  | Landmark                               | Self                                                                      | unval             | lly.         |              |             |                |        |
| 4.  | Ward Name/ No.                         | NA                                                                        |                   | U            |              |             |                |        |
| 5.  | Zone Name                              | NA                                                                        |                   |              |              |             |                |        |
| 6.  | Main Road Name & Width                 | Name                                                                      | •                 | Wid          | th           | Distance 1  | from pro       | perty  |
|     |                                        | 1000                                                                      |                   | 1 . 11       | 70           |             |                |        |
| 7.  | Approach Road Name & Width             | 111 047                                                                   | PROOC             | 1            | - 12         |             |                |        |
| 8.  | Location consideration of the          | ☐ Within Mai                                                              | n city, 🖂 V       | Vithin Goo   | d Urban      | developed A | Area, 🗆        | Within |
|     | Society                                | developing are                                                            | ea, 🗆 High        | ly posh loc  | ality,       | ery Good, [ | Good,          |        |
|     |                                        |                                                                           |                   |              |              |             |                |        |
|     |                                        | □ Ordinary, □ In interiors, □ Remote area, □ Backward, □ Average,         |                   |              |              |             |                |        |
|     |                                        | □ Poor                                                                    |                   |              |              |             |                |        |
| 9.  | Special Location consideration         | ☐ Park Faci                                                               | ng, 🗆 Poo         | I Facing,    | Road F       | acing, 🗆    | Entrance       | North- |
| 5.  |                                        | East Facing,                                                              |                   |              |              |             |                |        |
|     | of the property                        | ☐ Urban dev                                                               |                   |              | roloning [   | Semi Urb    | an $\square$ R | ural.  |
| 10. | Characteristics of the locality        |                                                                           |                   |              |              | _ Commons   |                |        |
|     |                                        | ☐ Backward,                                                               | ☐ Industria       | al, 🗆 Instit | tutional     |             |                |        |
|     |                                        | ☐ High End,                                                               | Normal            | ☐ Afford     | able Grou    | p Housing,  | □ EWS          | □ HIG  |
| 11. | Category of Society/ locality          | ☐ MIG, ☐ L                                                                |                   |              |              |             |                |        |
|     | to the locality                        | Diffs DG                                                                  | arden.   L        | andscapir    | ng, 🗆 Swi    | mming Poo   | I, 🗆 Gyr       | n,     |
| 12. | Utilities/ Facilities in the locality  | ☐ Club Hou                                                                | ise, $\square$ Wa | alk Trails,  | ☐ Kids p     | lay zone,   | □ 100°         | % Powe |
|     |                                        | Backup                                                                    |                   |              |              |             |                |        |
| 12  | Proximity to civic amenities           | School                                                                    | Hospital          | Market       | Metro        | Railway     | Station        | Airpo  |
| 13. | Proximity to sins a                    | San                                                                       | CIM               | Im           |              | -           |                |        |
|     | i development in                       | Sam                                                                       | 211               | 1            |              |             |                |        |
| 14. |                                        | NA                                                                        | *                 |              |              |             |                |        |
| 1   | surrounding area                       | 1 4/1                                                                     |                   |              |              | -           | - 0            |        |

| 15  | had a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Gram Panchavat, D No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 10  | Jurisdiction limits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | □ Nagar Nigam, □ Nagar Panchayat, □ Gram Panchayat, □ Ni                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 4.5 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Palika Parishad, Area not within any municipal limits Dehradun -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 16  | Development                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | □ DDA, □ GDA, □ NOIDA, □ GNIDA, □ YEIDA, □ HUDA, □KMDA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|     | Authority Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | □ MDDA, □ Any other Development Authority: Dehradun                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ☐ Area not within any development authority limits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 17. | Municipal Corporation Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | □ NDMC, □ SDMC, □ EDMC, □ Ghaziabad Municipal Corporation,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ☐ Gurgaon Municipal Corporation, ☐ Faridabad Municipal Corporation,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ☐ Kolkata Municipal Corporation, ☐ Dehradun Municipal Corporation,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ☐ Area not within any municipal limits, ☐ Any other Municipal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Corporation/ Municipality:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Corporation/ Widincipality.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|     | No. of the last of | PHYSICAL DETAILS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 1.  | Land Area  Oblivation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | As per Title deed As per Map As per site survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 46574. 62720 Sembl -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 2.  | Any conversion to the land use                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | NA.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 3.  | Land Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Solid, Rocky, Marsh Land, Reclaimed Land, Water                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | logged, ☐ Land locked                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 1.  | Shape of the Land                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ☐ Square, ☐ Rectangular, ☐ Trapezium, ☐ Triangular, ☐ Trapezoid,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | □ Irregular, □ NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 5.  | Level of Land                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ☐ On road level, ☐ Below road level, ☐ Above road level, ☐ NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 6.  | Frontage to depth ratio                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Normal frontage, ☐ Less frontage, ☐ Large frontage, ☐ NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|     | Are Boundaries matched                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Yes, No, No relevant papers available to match the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | boundaries,   Boundaries not mentioned in available documents                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|     | Is Independent access available                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Clear independent access is available,   Access available in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|     | to the property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | sharing of other adjoining property,   No clear access is available,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ☐ Access is closed due to dispute                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|     | Is property clearly demarcated                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ✓Yes, ☐ No, ☐ Only with Temporary boundaries                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 0.  | with permanent boundaries?  Is the property merged or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Mass made of the state of the s |
|     | colluded with any other property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes MIS ViJay Laxmi & mout Nandan.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|     | Property possessed by at the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Owner, Uacant, Lessee, Under Construction, Couldn't                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|     | time of survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | be Surveyed, ☐ Property was locked, ☐ Bank sealed, ☐ Court                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | sealed  Residential purpose,  Commercial purpose,  Godown,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|     | Current activity carried out in the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ Office, ☐ Industrial, ☐ Vacant, ☐ Locked, ☐ Any other use:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|     | property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Enjeujulnment :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED  | CONSTRUCTION/ UTLITY DETAILS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 1   | Construction Status                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ Built-up property in use, ☐ Under construction, ☐ No construction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

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| 2.  | Covered Built-up Area               | Area []               | Floor Asso C Supple As     | CI C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-----|-------------------------------------|-----------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|     |                                     |                       | Floor Area,   Super Ar     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | (Tick one on the basis of which     | As per Title deed     | As per Map                 | As per site survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|     | valuation is to be calculated)      | NA                    | RD29.47 52                 | old o alumy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 3.  | Total Number of Floors in the       | 1                     | 000/                       | 4 343.67                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|     | Building                            | M+I+2<br>Derty Pays   |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 4.  | Floor                               | Derty Page            | 10-1)                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 7.0 | Floor on which property is situated |                       |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 5.  | Type of Unit/ Number of Rooms/      |                       |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | Cabins/ Cubicles                    | 1                     |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 6.  | Building Type                       | RCC Framed Str        | ucture, 🗆 Load bearin      | g Pillar Beam column                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|     |                                     | ☐ Ordinary brick wa   | I structure,  Iron trus    | ses & Pillars  Scran                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|     |                                     | abandoned structure   | 1                          | ooo a r maro, — oorap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 7.  | Roof                                | a. Make: RBC,         | RCC, GI Shed,              | ☐ Tin Shed ☐ Stone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|     |                                     | Patla                 | or orica,                  | in ones, in otone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|     |                                     | b. Height:            |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                     | c Finish: Simp        | le plaster,  POP Pu        | unning POP Falso                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|     |                                     | Ceiling,  Coved       | roof,  No plaster          | arring, - ror raise                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 8.  | Flooring                            |                       | Ceramic Tiles, ☐ Sim       | ple marble  Marble                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|     |                                     | chips, Mosaic, C      | Granite,   Italian Marble  | e.   Kota stone.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|     |                                     | ☐ Wooden, ☐ PCC,      | ☐ Imported Marble, ☐       | Pavers,   Chequered                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|     |                                     |                       | ☐ No Flooring, ☐ Unde      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                     | other type:           |                            | The state of the s |
| 9.  | Appearance/ Condition of the        | Internal -   Excell   | ent,   Very Good,          | ☐ Good, ☐ Ordinary,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|     | Building                            | ∠ Average, □ Poor [   | ☐ Under construction, ☐    | No Survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|     |                                     | External - Excel      | lent,  Very Good,          | Good, Ordinary,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                     | ☐ Average, ☐ Poor [   | -                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 10. | Maintenance of the Building         | ☐ Very Good, ☐ Ave    | rage,   Poor,   Under      | construction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 11. | Interior decoration                 | ☐ Excellent, ☐ Ver    | y Good, Good, G            | Simple,   Ordinary,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|     |                                     | -                     | average,   Under cons      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 12. | Interior Finishing                  |                       | alls,   Brick walls witho  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                     | ☐ Designer textured v | walls,   POP punning,      | ☐ Coved roof,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|     |                                     | ☐ Under construction, | ☐ No Survey                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 13. | Exterior Finishing                  | Simple plastere       | d walls,   Brick w         | ralls without plaster,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|     |                                     |                       | signed or elevated, $\Box$ |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                     |                       | ☐ Aluminum composite       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                     |                       | omb,  Porch,  Under        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 14. | Kitchen                             |                       | board,  Ordinary with      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                     |                       | , ☐ High end Modular w     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 45  | Class of Flactrical fittings        | ☐ External, ☐ Interna | irvey fontry Con           | recently                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 15. | Class of Electrical fittings        |                       | & fittings,   Fancy li     | ohts  Chandeliers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|     |                                     |                       | , Under construction,      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 16. | Class of Sanitary/ Plumbing &       | ☐ External, ☐ Interna |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 10. | water supply fittings               |                       | Good, Good, Simple         | le,   Average,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|     |                                     | ☐ Below average, ☐    | Under construction,   N    | lo Survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 17. | Water arrangements                  |                       | ersible, 🗆 Jal board sup   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 18. |                                     | ☐ Excellent, ☐ Ver    | y Good, 🗆 Good, 🗗          | Simple,   Ordinary,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|     |                                     | ☐ Average, ☐ Below    | Average,   No wooden       | work,   No survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 19. | Age of Building/ Recent             | , O Vanon             |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | Improvements done                   | 18 Years              |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 20  | . Maintenance of the Building       | Very Good, Aver       | age,  Poor                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

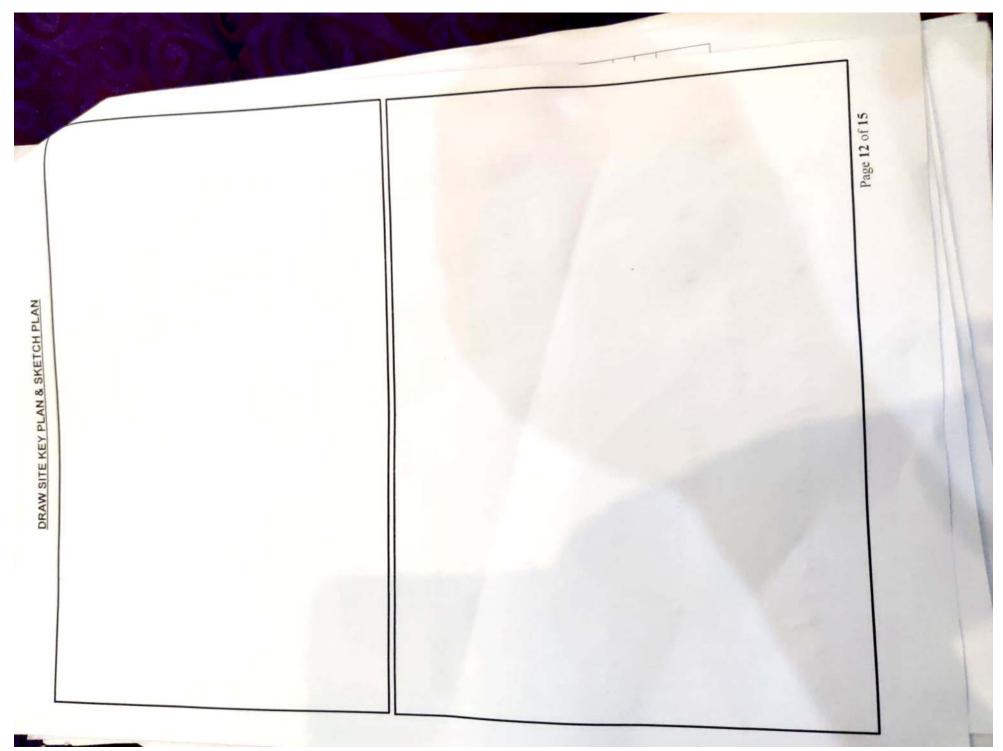
| 21.        | Any defects in the building                                                                                                                                                                                                                          | Maintenance issues,  Finish                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ing issues,  Seepage issues                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
|            |                                                                                                                                                                                                                                                      | ☐ Water supply issues, ☐ Electr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | icity issues,   Structural issue                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 15         |
|            |                                                                                                                                                                                                                                                      | ☐ Visible cracks in the building                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | -          |
| 22.        | Any violation done in the property                                                                                                                                                                                                                   | ☐ Construction done without                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Map   Construction not a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | s per      |
|            | property                                                                                                                                                                                                                                             | approved Map, □ Extra covered                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | without sanctioned Map.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | oined      |
|            |                                                                                                                                                                                                                                                      | adjacent property,   Encroached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | adjacent area illegally A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | -          |
| 23.        | Boundary Wall (Only for individual                                                                                                                                                                                                                   | adjacent property, \( \subseteq Encroached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | dang wall of a complex                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |
|            | property)                                                                                                                                                                                                                                            | ☐ Yes, ☐ No, ☐ Common boun Running Mtr. Height                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Width Finis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | h          |
|            |                                                                                                                                                                                                                                                      | Rulling Mit. Height                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |
| 24.        | Lift/ elevators                                                                                                                                                                                                                                      | 6 /8/                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |
| 24.        | Lift elevators                                                                                                                                                                                                                                       | ☐ Passenger/ ☐ Commercial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | T = 18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |
|            |                                                                                                                                                                                                                                                      | Make: No -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Capacity:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |
| 25.        | Power backup                                                                                                                                                                                                                                         | ☐ Inverter ☐ DG Set                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |
|            |                                                                                                                                                                                                                                                      | Make:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Capacity:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |
|            |                                                                                                                                                                                                                                                      | Wake.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Supusity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |
| 26.        | Garden/ Landscaping                                                                                                                                                                                                                                  | ☐ Yes, ☐ No, ☐ Beautiful, ☐ O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | rdinary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |
| 27.        | Parking facilities                                                                                                                                                                                                                                   | ☐ Available within the property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | On Ground, In Base                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | emen       |
|            |                                                                                                                                                                                                                                                      | * 1 to 1 t                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ☐ On stilt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |
|            |                                                                                                                                                                                                                                                      | ☐ Not available within the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | On road, Acute                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | arkir      |
|            |                                                                                                                                                                                                                                                      | property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | problem                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |
| 28.        | Special Comments/ Observations, if any                                                                                                                                                                                                               | · A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |
| 28.        | Special Comments/ Observations, if any                                                                                                                                                                                                               | NA.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |
| 28.        | if any                                                                                                                                                                                                                                               | LITY/ SELABILITY/ UTLITY D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ETAILS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |
| 28.        | if any                                                                                                                                                                                                                                               | Yes, No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |
|            | if any MARKETABIL                                                                                                                                                                                                                                    | Yes, No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Leç        |
|            | MARKETABIL Any issues in marketability of the                                                                                                                                                                                                        | Yes, No Reason in case of No:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ocation,  Surrounding,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Le         |
|            | MARKETABIL Any issues in marketability of the                                                                                                                                                                                                        | Yes, No  Reason in case of No: Shape,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Location, Surrounding, Any Other:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Leç        |
| 1.         | MARKETABIL Any issues in marketability of the property?                                                                                                                                                                                              | Yes, □ No  Reason in case of No: □ I aspects, □ Demand, □ Shape,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Location, Surrounding, Any Other:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |
| 1.         | MARKETABLE Any issues in marketability of the property?  How is Demand & Supply condition                                                                                                                                                            | Yes, □ No  Reason in case of No: □ I aspects, □ Demand, □ Shape,  Demand □ Very Good, □ Go                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ocation, Surrounding, Any Other:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | oor        |
| 1.         | MARKETABIL  Any issues in marketability of the property?  How is Demand & Supply condition in the Market of such properties?                                                                                                                         | Yes, No  Reason in case of No: Shape, aspects, Demand, Shape, Demand Very Good, Good | Location, Surrounding, Any Other:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | oor        |
| 1.         | MARKETABLE Any issues in marketability of the property?  How is Demand & Supply condition                                                                                                                                                            | Yes, No  Reason in case of No: Shape, aspects, Demand, Shape, Demand Very Good, Good | Location, ☐ Surrounding, ☐ Any Other:  ood, ☐ Average, ☐ Low, ☐ Food, ☐ Average, ☐ Low, ☐ Average, ☐ Averag | oor<br>oor |
|            | MARKETABIL  Any issues in marketability of the property?  How is Demand & Supply condition in the Market of such properties?                                                                                                                         | Yes, No  Reason in case of No: Shape, aspects, Demand, Shape, Demand, Shape, Supply Very Good, G | Docation, Surrounding, Any Other:  Dood, Average, Low, Food, Foods Williams                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | oor<br>oor |
| 1.         | MARKETABLE Any issues in marketability of the property?  How is Demand & Supply condition in the Market of such properties?  Is property easily sellable & marketable?                                                                               | Yes, No  Reason in case of No: Shape, aspects, Demand, Shape, Demand, Shape, Supply Very Good, G | Docation, Surrounding, Any Other:  Dood, Average, Low, Food, Foods Williams                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | oor<br>oor |
| 1.         | MARKETABLE Any issues in marketability of the property?  How is Demand & Supply condition in the Market of such properties? Is property easily sellable & marketable?  How is the current utility of the property?                                   | Yes, No  Reason in case of No: Sapects, Demand, Shape,  Demand Very Good, Good, Good  Supply Very Good, Good  Yes, No  Comments:  Hatel Accept                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Docation, Surrounding, Any Other:  Dood, Average, Low, Food, Foods Williams                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | oor<br>oor |
| 1. 22.     | MARKETABIL  Any issues in marketability of the property?  How is Demand & Supply condition in the Market of such properties?  Is property easily sellable & marketable?  How is the current utility of the property?  At what True rate Owner bought | Peason in case of No: aspects, Demand, Shape, Demand Very Good, Go Supply Very Good, Go Comments:  Papel S Accept  Excellent, Very Good, G | Docation, Surrounding, Any Other:  Dood, Average, Low, Food, Foods Williams                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | oor<br>oor |
| 1. 22. 33. | MARKETABLE Any issues in marketability of the property?  How is Demand & Supply condition in the Market of such properties? Is property easily sellable & marketable?  How is the current utility of the property?                                   | Yes, No  Reason in case of No: Sapects, Demand, Shape,  Demand Very Good, Good, Good  Supply Very Good, Good  Yes, No  Comments:  Hatel Accept                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Docation, Surrounding, Any Other:  Dood, Average, Low, Food, Foods Williams                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | oor<br>oor |

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Page 11 of 15 mis mount Nooden fartyatentimited et अस्ता क



| Z             | Particulars Name (source of information)                                                                                                                     | Subject<br>Property<br>NA | out feet                          |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------------------------------|
| S             | Contact No.                                                                                                                                                  | N<br>N                    | 6397222043 7906587306             |
| T P P         | Type of source of information (Seller/Property dealer/ nearby people)                                                                                        | Y<br>V                    | 819 512 Lond on soud subtle Lond. |
| E TO          | Rates/ Price informed (in Rs. with unit)                                                                                                                     | A N                       | 12/01/01/                         |
| B.            | Rates Type (Sale/ Buy)                                                                                                                                       | A<br>A                    | Sule - sale                       |
| 0000          | Shape of the Property (Square, Rectangular, Irregular)                                                                                                       |                           | MI Size M15'2e                    |
| A U           | Area/ Size of the<br>Property                                                                                                                                |                           | (500-10000) 59 Varely             |
| 750           | Legal Status (clear,<br>negative, weak)/ No. of<br>owners                                                                                                    |                           | cleese Mixes                      |
| 7 5 0 0 5 7 8 | Location/ surrounding/<br>neighborhood<br>comparison with the<br>subject property<br>(Similar, Lower, Better,<br>Highly Better than the<br>subject Property) | Base Case                 | Sissifice                         |
| 0 0           | Distance from the subject Property                                                                                                                           | 0                         | 1 500ml - 1 km                    |
| 0.112         | Other factors (Corner, 2 side open, North-East facing, Park facing, Legal/ Financial                                                                         |                           | Road fewing                       |
| -             | Approach road width                                                                                                                                          |                           | # D 18 2 - # D                    |
|               | Level of Land (Below/<br>On/ Above road level)                                                                                                               |                           | Below Le                          |
|               | Frontage to depth ratio (Normal, Less, Large)                                                                                                                |                           | Norman                            |
|               | Present Use                                                                                                                                                  |                           |                                   |
|               | Any other details/<br>Discussion held                                                                                                                        | A Z                       | 0                                 |
| 17.           | Present expected Sale Value of the overall                                                                                                                   |                           | Back Sydedin e 1,                 |

### UNDERTAKING BY THE CUSTOMER

correct property in question for which the documents have been provided/ submitted by me. I further confirm that I am according that I am aware of all the information related to the subject property and I have provided all its information to the me will be considered as cheating with the professional organization since it will lead to incorrect valuation correct property is surveyor true to the best of my knowledge. I understand that any false or manipulative information provided by report and I'd be solely responsible for this unlawful act and will bear the charges for the changes/ modifications which have to undergo due to the false information. I also undertake that I have not given any cash or in kind to any member of R.K Associates to influence the Value of the Property or favor any individual or organization and the same is not accepted or asked by the member of R.K Associates. Any such act will lead to cancellation of the material prepared by R.K Associates with forfeiting of the fees and i'll be completely responsible for its repercussions and legal actions taken for it. IMPORTANT: We have not authorized any of our person/ Surveyor to take Cash or kind from the customers in any situation. In case Surveyor or any member of R.K Associates asks for any money or kind from you then kindly please inform on number +91-9958632707, 0120-4110117. Our Valuation process is very stringent and have multiple check points to ensure correct & error free reports to keep the lending agency risk free. In case Surveyor claims that he would be able to arbitrary effect the Valuation figures unfairly or as per your requirement & need, then he is making a false claim to you and we request you to complaint such act immediately on the number provided above.

| Name                    | Trumod tract. |
|-------------------------|---------------|
| Relationship with owner | Director.     |
| Signature               | Fred Park     |
| Mobile No.              | 9897042089.   |
| Date                    | 13/7/93.      |

## UNDERTAKING BY THE SURVEYOR

wrong or false information or statement. In case at any point of time it is found that I have done any kind of fraudulent activity in this case and misled the company then I understand its legal consequences and Valuation as per one's need. I further state that I have not given any assurances to the customer nor given any appropriate penal action which company can take against me. Also in regard to it any monetary or reputation I confirm that I have carried out the Survey of the property properly as per the fair professional best practices and Valuation & Survey policy guidelines issued by R.K Associates. I have not taken any cash or kind from the customer nor have I come into any kind of influence of the customer I bank for arbitrary providing the Property loss will be recovered from me by the company.

Page 14 of 15 184-Surveyor Name For File No. Signature Date

### UNDERTAKING BY THE PREPARER

information as per best of my knowledge & case facts. I understand that any false information provided by me will lead to the incorrect valuation report and I'd be solely responsible for it and will bear the losses which will prudent approach without any blasedness or pressure. I have prepared the report based on true facts & all sincere efforts to review, cross check & confirm this data/ information from all different angles using my or prejudice, I have worked on this Valuation assignment. Rates adopted for the asset is based on various facts. Information collected from the site came to my knowledge during the course of the assignment and I have taken I confirm that this Valuation Report is prepared as per the fair professional best practices and Valuation & Survey Policy Guidelines issued by the organization. I also confirm that without any personal interest, partiality be put on the Company in form of monetary or reputation loss by its client or statutory bodies.

I also undertake that I did not come into any influence by the customer, Bank representative (officer or agent), colleagues, coworkers or any other person to arbitrary change the Valuation figures or facts unethically illegitimately which may put the public money at risk which is in the form of Bank deposits.

Bank representative (officer or agent) or for whatsoever reason then I'd solely responsible of any such act and I understand that the Company can take appropriate legal action against me which may include suspension from any other professional services which company offers in the market on being influenced by the customer or In case at any point of time in future, if I am found guilty of illegitimately distorting the facts in the Valuation or the current roles & responsibilities or termination from the employment with immediate effect.

I also undertake that I have not taken any cash, favor or in kind from the customer for favoring any individual or organization by unfair means.

Company guidelines and in case I am preparing it which is creating an incorrect report then I'd be responsible I also undertake that I'll not prepare any report on incomplete Survey form which is not properly filled as per the for its consequences.

Enclosure: 6

# (TO BE ENCLOSED WITH VALUATION REPORT) (Version 1.0) | Date of implementation: 10.04.2017

Every Valuation report at R.K Associates is prepared based on the thorough survey of the property carried out by our Engineering Surveyor. This Survey Summary Sheet is for the information of Banker/ concerned interested organization. Detailed Survey Form can also be made available to the interested organization in case it is required to cross check what information our surveyor has given in site inspection report based on which Valuation report is prepared.

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|-----|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| i   | File No.                                         | VIS 2023 24)                                                                                                                             | 1184-151-24                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 4   | Name of the Surveyor                             | Darueen Cha                                                                                                                              | houxand,                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| m   | Borrower Name                                    |                                                                                                                                          | 1 - 3 4 0 0                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 4   | Name of the Owner                                | MIG myself                                                                                                                               | Muston oyour 1th.                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| S.  | Property Address which has to be valued          | with his                                                                                                                                 | pehras                                                                                                                                                                                                                                                                                                         | -m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 6   | Property shown & identified by at spot           | Could not be done from inside                                                                                                            | □ No one was ave                                                                                                                                                                                                                                                                                               | d, survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 7.  | How Property is Identified by the Surveyor       | From schedule of the prodisplayed on the property, Enquired from nearby people Survey was not done                                       | ntioned in the deed, Comparting the owner of cation of the property of                                                                                                                                                                                                                                         | ame plate stative, to be done,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 00  | Are Boundaries matched                           | ✓ Yes, ☐ No, ☐ No relevant papers available ☐ Boundaries not mentioned in available documents                                            | to match the                                                                                                                                                                                                                                                                                                   | boundaries,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| oi. | Survey Type                                      | ☐ Full survey (inside-out with measurements & ☐ Half Survey (Measurements from outside & ☐ ☐ Only photographs taken (No measurements)    | ☐ Full survey (inside-out with measurements & photographs) ☐ Half Survey (Measurements from outside & photographs) ☐ Only photographs taken (No measurements)                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 10. | Reason for Half survey or only photographs taken | ☐ Property was locked, ☐ Possessee didn't property so couldn't be surveyed completely                                                    | □ Property was locked, □ Possessee didn't allow to inspect the property, property so couldn't be surveyed completely NA                                                                                                                                                                                        | rty, 🗆 NPA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 11  | Type of Property                                 | ☐ Flat in Multistoried Apartr Residential Builder Floor ☐ Commercial Shop, ☐ Comm ☐ Institutional, ☐ School Bi Plot, ☐ Agricultural Land | ☐ Flat in Multistoried Apartment, ☐ Residential House, ☐ Low Rise Apartment, ☐ Residential Builder Floor, ☐ Commercial Land & Building, ☐ Commercial Office, ☐ Commercial Shopping Mall, ☐ Hotel, ☐ Institutional, ☐ School Building, ☐ Vacant Residential Plot, ☐ Vacant Industrial Plot, ☐ Agricultural Land | Rise Apartment, Lammercial Office, Lamercial Office, Vacant Industrial, Lamercial, Lamer |
| 12. | Property Measurement                             | ☐ Self-measured, ☐ Sample                                                                                                                | Sample measurement, A No measurement                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 13. | Reason for no measurement                        | ☐ It's a flat in multi storey be property was locked, ☐ didn't enter the property, measure the area within lim                           | □ It's a flat in multi storey building so measurement not required □ Property was locked, □ Owner/ possessee didn't allow it, □ NPA property so didn't enter the property, □ Very Large Property, practically not possible to measure the area within limited time □ Any other Reason:                         | NPA property so<br>not possible to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 14. | Land Area of the Property                        | As per Title deed                                                                                                                        | 2 mar                                                                                                                                                                                                                                                                                                          | u Sg and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 15. | Covered Built-up Area                            | Title deed                                                                                                                               | S OLYNY 59 mys oldwork U343-67                                                                                                                                                                                                                                                                                 | 1343 - 67                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 16. | Property possessed by at the time of survey      | □ Property was locked, □                                                                                                                 | Owner, U Vacant, U Lessee, Court sealed Property was locked, D Bank sealed, Court sealed                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 17. | Any negative observation of the                  | 42                                                                                                                                       |                                                                                                                                                                                                                                                                                                                | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

| 18. Is Independent access available to the property the property demarcated with any other property merged or colluded with any other property adjoining property clearly demarcated with any other property merged or colluded with any other property and please refer attached sheet named 'Property rate information Details.' | Is property clearly demarcated with permanent boundaries? Is the property merged or colluded with any other property Local Information References on | Is property closely, a | - | Is independent account | Is Independent access available to the property is property clearly demarcated with permanent boundaries? Is the property merged or colluded with any other property |
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### Endorsement:

# Signature of the Person who was present from the owner side to identify the property;

have shown wrong property or misled the valuer company in any way then I'll be solely responsible for this Undertaking: I have shown the correct property and provided the correct information about the property to the surveyor of R.K Associates to the best of my knowledge for which Valuation has to be prepared. In case I unlawful act.

Director Name of the Person: \$ 5000 Chock

Relation: . a Signature:

In case not signed then mention the reason for it:  $\square$  No one was available,  $\square$  Property is locked,  $\square$  Owner/ 14/7/23

representative refused to sign it,  $\square$  Any other reason:

### Surveyor Signature who did site inspection: 5

understand that giving any manipulative information in the survey form will lead to incorrect Valuation report interested organization. I have not come under influence of anyone during site inspection and have only recorded the true and factual details in the survey form which I come across during the site survey. Matching boundaries of the property, b. Sample measurement of its area, c. Physical condition, d. Property rates as per local information with what is mentioned in the property documents provided to me by the Bank/ Undertaking: I have inspected the property and cross verified the property details at site to the extent of a. which is an unlawful act and i'll be solely responsible for doing it.

Name of the Surveyor, orn Shown Signature:

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Date: