

General Remarks:

SMART SOLUTIONS

)/ 301	utions)	CLIE	CULICT FO	D DOCLIA	AENITO					
-				CHE	CKLIST FO	K DOCUM			RSN/494648			
	/ Name		ATE USER				Proposal No		HOV2301003			
ID / CR No 464565 Dealer Name TOP GE							Proposal Date		1-2023			
Sales Executive APPRO			GEAR MOTORS	SLLC				LPO No / Acc No 133		OFFICE.		
Contract Type New							Branch Approved by	HEAL	OFFICE .			
	***						Approved by					
Maker:			EM ADMIN									
Type of Seller N		ASSET DESCRIP	IION				lo. Of Units eller Id	1				
		500 000 000				_						
Asset C	ost e Amount	500,000.000					own Payment		.000 12 Months			
	eceivable	525,000.000				<u></u>	enure	12 1010111	.115			
	eccivable			A	Dana	0.5	Unit Coat	Davin 1121 112	-t Fina			
S:No	TOD CEAD	Dealer			Desc	Qty 1	Unit Cost	Down payme		Finance Amount		
1 C-N-	_	OP GEAR MOTORS LLC		ASSET DESCRIPTION			500,000.000	I	700 To	500,000.000		
S:No			ank		21-01-2023	Branch		From 1	12	EMI 43,750.000		
1 C-N-	Muscat			Chahua		Received	CAD Bassius d					
S:No	Docum	ent Desc	Doc. Type	Status	Received by	Date	CAD Received Date	CAD	y Verified by	Remarks		
1	Proposal Form Completed	Duly		R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	Remarks		
2	Agreement			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	1		
3	Guarantee, if any, with			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	1		
4	Guarantor's Signature (a) Post-dated Cheques:			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	2		
5	Driving License Copy of Regd. Owner			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	4		
6	Copy of Guarantor's NID Civil Card Passport Emp.ID			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	5		
7	Salary Certificate Emp.ID			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	6		
8	Proof of income - bank statement		Primary	R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	7		
9	LIP Form			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	8		
10	Authorization Letter from Hirer for Regn.(if applicable)			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	9		
11	Board Resoluti			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	10		
12	Address Proof			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	11		
13	Copy of Mulkiy	⁄a		R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	1		
14	(a)Insurance Po	olicy By		R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	2		
15	Down Paymen	t Receipts	X	R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	3		
16	Original Signed	Delivery Note		R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	4		
17	Original Signed	Priginal Signed Invoice		R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	5		
18	Others			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	6		
19	(b)Copy of Auth. Signatory's NID Passport Civil Card)			R	SYSADM	21-01-2023		SYSADM	SYSADM	12		
20	(b)STF (c) Cash	<u> </u>		R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	7		
21	Photograph of: Hirer Regd.Owner			R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	13		
22	CRS-E- Partnership/LLC/SAOC/SAOG		Secondary	R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	14		
23	CR Set		Primary	R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	15		
24	Copy of: NID Passport Lab		Primary	R	SYSADM	21-01-2023		SYSADM	SYSADM	16		
25	CRS-I-Individua		Primary	R	SYSADM	21-01-2023	21-01-2023	SYSADM	SYSADM	17		

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The above Documents except those specifically waived by MF should be submitted for the Payment.Note: 1) Any documents waived by MF must be in writing and duly acknowledged. 2) The Above Approved Checklist is valid for 90 days from the date of issuing the checklist. 3) Received (R) / Not Received (NR) / Waived (W)/Not Applicable (NA)



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SMART SOLUTIONS

) Sol	utio	ns			Tel.No:	FaxNo: 24625	310					
1))	01010	1 10		CHE	CKLIST FOR	R DOCUM	ENTS	9	S.No: RSN	N/494649		
Cust No / Name CREA				CREATE USER							HOV2301002		
•				46456546					-		2023		
Dealer Name TOP 0			TOP GEAR	OP GEAR MOTORS LLC)	3			
Sales Executive APPR				R				Branch		HEAD O	FFICE		
Contract Type New								Approved by					
Maker:			SYSTEM A	DMIN					U				
Type of	Type of Asset ASSET DESCRIPTION						No	o. Of Units 1					
Seller N								eller Id					
Asset C	ost	500,000.0	000				Do	own Payment	.0	00			
	Amount	500,000.0						Tenure		12 Months			
Total R	eceivable	525,000.0											
S:No		Dealer					Qty	Unit Cost	Down payment Finance			nce Amount	
1	TOP GEAR	R MOTORS I	11.0	ASSET DESCRIPTION			1	500,000.000				500,000.00	
S:No		N IVIOTORS I	Bank	713321 8	2301111101		Branch	300,000.000	Fror		To	EMI	
1		Finance	Dank			17-01-2023	branch		1101	1	12	43,750.000	
				T	Ctatus		Dessived	CAD Bassived	Dage			· · · · · · · · · · · · · · · · · · ·	
S:No	Docun	nent Desc	D	oc. Type	Status	Received by	Received Date	CAD Received Date		ived by CAD	Verified	Remarks	
							Date				by		
1	Proposal Forn	n Duly			NR			21-01-2023	SYSA	ADM	SYSADM		
_	Completed								_				
2	Agreement			NR			21-01-2023	SYSA	ADM	SYSADM			
3	Guarantee, if any, with				NR			21-01-2023	SYSA	MDM	SYSADM		
	Guarantor's Signature												
4	(a) Post-dated			NR			21-01-2023	SYSA	ADM	SYSADM			
5	0 1		egd.		NR			21-01-2023	SYSA	ADM	SYSADM		
	Owner												
6	Copy of Guarantor's NID Civil				NR			21-01-2023	SYSA	MDM	SYSADM		
_	Card Passport Emp.ID												
7	Salary Certificate Emp.ID)		NR			21-01-2023	SYSA	ADM	SYSADM		
8	Proof of incor	ne - bank	Pri	mary	NR			21-01-2023	SYSA	ADM	SYSADM		
	statement												
9	LIP Form				NR			21-01-2023	SYSA	ADM	SYSADM		
10	Authorization Letter from Hirer for Regn.(if applicable)				NR			21-01-2023	SYSA	ADM	SYSADM		
11	Board Resolut	tions			NR								
12	Address Proof	f		4	NR								
13			4		NR	•		21-01-2023	SYSA	DM.	SYSADM		
14		Copy of Mulkiya											
	(a)Insurance Policy By				NR			21-01-2023	SYSA		SYSADM		
15	Down Payment Receipts				NR			21-01-2023	SYSA		SYSADM		
16	Original Signe	d Delivery N	lote		NR			21-01-2023	SYSA	MDM	SYSADM		
17	Original Signed Invoice				NR			21-01-2023	SYSA	MDM	SYSADM		
18	Others				NR			21-01-2023	SYSA	ADM	SYSADM		
19		(b)Copy of Auth. Signatory's NID Passport Civil Card)			NR								
20	(b)STF (c) Cas		1		NR			21-01-2023	SYSA	DM	SYSADM		
								21-01-2023	3132	NDIVI	STORDIVI		
21	Photograph o Regd.Owner	f: Hirer			NR								
22	CRS-E- Partnership/L	LC/SAOC/SA		condary	NR								
23	CR Set	, , , , , , , , , , , , , , , , , , , ,		mary	NR								
24	Copy of: NID	l Civil Card I		mary	NR			+	+				
- -⊤	Passport Lal		[[птагу	1111								
25	CRS-I-Individu	ıal /Self	Pri	mary	NR								
	Employed/Pro	oprietor											
Genera	l Remarks:												

11-03-2023 23:56:11 Page 1 of 2 The above Documents except those specifically waived by MF should be submitted for the Payment.Note: 1) Any documents waived by MF must be in writing and duly acknowledged. 2) The Above Approved Checklist is valid for 90 days from the date of issuing the checklist. 3) Received (R) / Not Received (NR) / Waived (W)/Not Applicable (NA)



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SMART SOLUTIONS

	Sol	utior	15			Tel.No: F	axNo: 24625	310					
1	501	acioi			CHE	CKLIST FOR	DOCUM	1ENTS	S.N	lo: RSN	/494650		
Cust No / Name CREATE USER								Proposal No	Н	OV230	1001		
				6456546				Proposal Date 16-01-2023					
				P GEAR MOTORS LLC				LPO No / Acc No 123					
Sales Executive APPRO				R				Branch	Н	EAD O	FFICE		
Contract Type New								Approved by					
Maker:		YSTEM A	DMIN										
	Type of Asset ASSET DESCRIPTI							lo. Of Units					
Seller N								eller Id					
Asset Cost 500,000.000 Finance Amount 500,000.000								own Payment		.000 12 Months			
	e Amount eceivable	500,000.000					I	enure	12 N	/lonths			
	eceivable	•)										
S:No	TOD 0540	Dealer		Asset			Qty	Unit Cost	Down payment		Finance Amount		
1		MOTORS LL		ASSET DESCRIPTION		N .	1	500,000.000	.000				
S:No			Bank			16.01.2022	Branch		From	1	To	EMI	
1		Finance				16-01-2023				1	12	43,750.000	
S:No	Docum	ent Desc	De	oc. Type	Status	Received by	Received Date	CAD Received Date	Receive CAI	,	Verified by	Remarks	
1	Proposal Form Duly				NR			16-01-2023	SYSAD	М	SYSADM		
2	Completed Agreement				NR			16-01-2023	SYSAD	М	SYSADM		
3	Guarantee, if any, with				NR			16-01-2023	SYSAD	М	SYSADM		
4	Guarantor's Signature (a) Post-dated Cheques:				NR			16-01-2023	SYSAD	M	SYSADM		
5	Driving License Copy of Regd.				NR			16-01-2023	SYSADM		SYSADM		
6	Owner Copy of Guarantor's NID Civil				NR		1	16-01-2023	SYSAD	М	SYSADM		
7	Card Passport Emp.ID Salary Certificate Emp.ID				NR			16-01-2023	SYSAD	M	SYSADM		
8				mary	NR								
9	statement LIP Form				NR								
10	Authorization Letter from Hirer for Regn.(if applicable))		NR								
11	Board Resolutions				NR								
12	Address Proof				NR								
13	Copy of Mulkiya (a)Insurance Policy By				NR								
14 15	Down Paymen				NR NR								
16	Original Signe	<u> </u>	re l		NR								
17	Original Signed	<u> </u>			NR								
	Others	u ilivoice			NR								
18 19	(b)Copy of Aut	th. Signatory's	;		NR NR								
20	NID Passport Civil Card) (b)STF (c) Cash Receipt		NR										
21	Photograph of				NR								
	Regd.Owner												
22	CRS-E- Partnership/Ll	_C/SAOC/SAO		condary	NR								
23	CR Set		Pri	mary	NR		-				·		
24	Copy of: NID Passport Lab	•	Pri	mary	NR								
25	CRS-I-Individu Employed/Pro	al /Self	Pri	mary	NR								
	I Remarks:	γριτοτοι											

11-03-2023 23:56:14 Page 1 of 2 The above Documents except those specifically waived by MF should be submitted for the Payment.Note: 1) Any documents waived by MF must be in writing and duly acknowledged. 2) The Above Approved Checklist is valid for 90 days from the date of issuing the checklist. 3) Received (R) / Not Received (NR) / Waived (W)/Not Applicable (NA)



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