

FORM COMP AA**REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS**

Police Station:	WARTHI
CR.No./TAR NO./SDE NO:	CR.NO.105/2024 KALAM 279.337 I.P.C
Date, Time & Place of accident:	12/05/2024 To 18/30 Gandhi Ward Warthi Railway Talaw 01 K.m
Name of the Injured/Deceased:	Vijay Arjun Nagdeve Age.67 Year Ra.jagnade Chowk Warthi Ta.Mohadi Dis.Bhandara
Name of Hospital to which he/she was removed:	General Hospital Bhandara
Number of vehicles and type of the vehicle:	MH.-36-V9968 YAMAHA RAYZR MOPED
Name and address of the driver of the vehicle with particulars or Driving license of the said Driver and the Issuing Authority of the said Driving License:	Ish Sudhir Bagde Age.18 Year Ra.Neharu Ward Warthi Ta.mohadi Dis.Bhandara
The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:	NO
Name and address of the Owner of the vehicle as it stands on the date of the accident:	Archana Shudur Bagde At.Neharu Ward Warthi Ta.Mohadi Dis.Bhandara
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	No Insurance
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	NO INSURANCE
Action taken,if any,and the result thereof:	Police Station Warthi Ta.Mohadi Dis.Bhandara

Inspector of Police