

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

Police Station:	WARTHI
CR.No./TAR NO./SDE NO:	114/2024 U/S 279.337.338.I.P.C.R/W 184.134
Date, Time & Place of accident:	22/05/2024 TIME 19/50 SUNFLYAG COMPANY BACK SIDE EAKRALI TO BID DAMBARI ROAD 2 K.M.
Name of the Injured/Deceased:	RAHUL PARASRAM RAHANGDALE AGE.26 YEAR AT.PACHGOV TA.MOHADI DIST.BHANDARA
Name of Hospital to which he/she was removed:	SAI SUMHOSPITOL BHANDARA
Number of vehicles and type of the vehicle:	M.H.49-A.T-8541 BOLERO PICK UP
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:	RAKESH DHANRAJ KHUMBALKAR AGE.27 YEAR AT.LAVESWAR TA.DIST.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:	YASHWANT NARHARI KHANORKAR AT.BHAWANI NAGAR PARDI NAGPUR PUNAPUR ROAD NAGPUR
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	CHOLA MANDALAM MS GEBERAL INSURANCE COMPANY LTD
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	3379/038008685/000/00 FROM 10/02/2024 00/00 HOURS TO MIDNIGHT ON 17/022025
Action taken,if any,and the result thereof:	OFFENCE REGISTERD POLICE STATION WARTHI CR.NO.114/2024 U/S.279.337.338.I.P.C. R/W 184.134

Inspector of Police

