

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

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| <b>Police Station:</b>   | LAKHANDUR   |
| <b>CR.No./TAR NO./SDE NO:</b>  | 286/2024, SECTION 281, 125 (A)(B),106(1) B. N. S. 2023 R/W 184 M. V. ACT.   |
| <b>Date, Time &amp; Place of accident:</b>   | Date : 02/09/2024 Time : 13:00 Pm Place : Near Medha Kanhagaon Road Lakhandur   |
| <b>Name of the Injured/Deceased:</b>   | Deceased:- Vinod Bhudhaji Ramteke Age -50 Year At - Kanhalgaon Ta- Lakhandur . Dist Bhandara  |
| <b>Name of Hospital to which he/she was removed:</b>   | RHC Lakhandur, Medical College Nagpur   |
| <b>Number of vehicles and type of the vehicle:</b>   | TWOWHEELER VEHICLE  |
| <b>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:</b> | Driver, Address Issuing Authority:- Hero Spender MH-36-T-7835 Of Owner - Pandurang Kishan Raut Age - 64 Year At -Athali Ta- Lakhandur |
| <b>The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:</b>   | NO  |
| <b>Name and address of the Owner of the vehicle as it stands on the date of the accident:</b>  | Owner - Pandurang Kishan Raut Age - 64 Year At -Athali Ta- Lakhandur  |
| <b>Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:</b>                        | No  |
| <b>Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:</b>                                     | NO  |
| <b>Action taken,if any,and the result thereof:</b>   | 286/2024, Section 281, 125 (a)(b),106(1) B. N. S. 2023 R/w 184 M. V. Act.   |

Inspector of Police