

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

Police Station:	LAKHANDUR
CR.No./TAR NO./SDE NO:	335@24 SEC 281, 125(A),125(B), 106(1) BNS R/W 184, 3/181, 4(1)/181 MV ACT
Date, Time & Place of accident:	25/10/2024 TIME 17.00 PM NEAR TATHAGAT WELDING SHOP WADSA SAKOLI ROAD LAKHANDUR
Name of the Injured/Deceased:	01) SUBODH RAKESH CHANDRAGADE, AGE 17 Y, AT. PARDI, TA. LAKHANDUR, DIST. BHANDARA 02) FATAL - DHANPAL GOPINATH RAMTEKE, AGE 55 Y, AT. PO. ANTARGOAN, TA, LAKHANDUR, DIST. BHANDARA
Name of Hospital to which he/she was removed:	RURAL HOSPITAL LAHKHANDUR AND GENERAL HOSPITAL BHANDARA
Number of vehicles and type of the vehicle:	MH 36 AH 7870 HF DELUX
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:	SUBODH RAKESH CHANDRAGADE, AGE 17 Y, AT. PARDI, TA. LAKHANDUR, 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:	MAYUR MALLESH BORKAR, AGE 23 Y, AT. P[O. WARD NO 05 LAKHANDUR, TA. LAKHANDUR, DIST. BHANDARA
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	ICICI LOMBARD
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	3005/50208616/10322/000
Action taken,if any,and the result thereof:	335@24 Sec 281, 125(A),125(B), 106(1) BNS R/W 184, 3/181, 4(1)/181 MV ACT

Inspector of Police