



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	MOHADI
CR.No./TAR NO./SDE NO:	146/2018 SEC 304 (A),279,379,109 IPC R/W 184 MV ACT.
Date, Time & Place of accident:	19/10/2018 AT- Rohana
Name of the Injured/Deceased:	Rupchand Gorbaji Agashe Age 60 Year At. Rohna TA-.MOHADI Dist-.BHANDARA
Name of Hospital to which he/she was removed:	Rural Hospital, Hohadi Ta.Mohadi, Dist.Bhandara
Number of vehicles and type of the vehicle:	TRUCK NO-.MH 36 F 3774
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:	Kartik Udaram Thawkar Age 31 Year At- Kawalewada (Aamgao-Dighori) 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:	Manish Dilip Mehar Age 25 Year At.Shivaji Chowk,Shukravari Bhandara Dist.Bhandara
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	Jaika Insurance Brokerage PVT.LTD
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	2315/58415095/00/B00 VALIDITY DATE 20/04/2018 TO 19/04/2019
Action taken,if any,and the result thereof:	Crime Registerd Agenst

Inspector of Police

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