



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	GOBARWAHI
CR.No./TAR NO./SDE NO:	158/18 SEC 279,304(A) IPC R/W 184 MVA
Date, Time & Place of accident:	15/10/18 At 15:30 Sh 251 Near Lendezari
Name of the Injured/Deceased:	Hemraj Jayram Neware Age 30 Yrs R/o Mangarali, Ta. Tumsar, Dist. Bhandara
Name of Hospital to which he/she was removed:	None
Number of vehicles and type of the vehicle:	DECEASED HERO HONDA PASSION PLUS MH 31/ BA 4745. ACCUSED ST BUS NO. MH40/ 8949
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:	Rama Shivdev Atkari, Age 35 Yrs, R/o ST AAGAR, Tumsar
The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:	ST BUS NO. MH40/ 8949
Name and address of the Owner of the vehicle as it stands on the date of the accident:	Secretary MSRTC, MAHARASHTRA VAHTUK BHAVAN DR RN MARG MUMBAI
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	Exemption Of Motor Vehicle From Insurance Under Sec 146 Of Motor Vehicle Act 1988 By The Order Of Govt. Of Maharastra MVA-2089/CR-1037-TRA-2 DATED 30/01/1989
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	NONE
Action taken,if any,and the result thereof:	None

Inspector of Police

* System generated document no signature required