

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

<b>Police Station:</b>	BHANDARA
<b>CR.No./TAR NO./SDE NO:</b>	CR-136/2021 U/S 279,338 IPC R/W -184 MV ACT
<b>Date, Time &amp; Place of accident:</b>	DATE -16/04/2021 TIME-14:00 PM PLACE-NH6 ROAD BELA IN FRONT UNITED CONVENT
<b>Name of the Injured/Deceased:</b>	1)SUSHIL BHAGWAN MATE AGE -29 YR 2) Sau. RESHMA SUSHIL MATE AGE-21 YR
<b>Name of Hospital to which he/she was removed:</b>	AMEYA HOSPITAL TAKIYA WARD ,BHANDARA
<b>Number of vehicles and type of the vehicle:</b>	NO - MH49 U 9169 DUSTER RXL CAR
<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>	NAME- Rahul Rajesh Pandey AGE - 24 Yr ADD- Plot No 26 Chandra Nagar Parvati Nagar Nagpur
<b>The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:</b>	-----
<b>Name and address of the Owner of the vehicle as it stands on the date of the accident:</b>	NAME - Rajesh Rammurty Pandey ADD- Plot No 26 Chandra Nagar Parvati Nagar Nagpur
<b>Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:</b>	Future Generali India Insurance Company Limited
<b>Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:</b>	NO - V8017736 VALIDITY -15/01/2021 TO 14/01/2022
<b>Action taken,if any,and the result thereof:</b>	POLICE PENDING

Inspector of Police