

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

Police Station:	TUMSAR
CR.No./TAR NO./SDE NO:	146/2022 SECTION 279,338,IPC R/W 184/177,134(A)(B) MV ACT
Date, Time & Place of accident:	23/04/2022 11/15 To 11/30
Name of the Injured/Deceased:	Gunjan Chandsen Tembhare Age 17 Year At Post Sriram Nagar Tumsar
Name of Hospital to which he/she was removed:	Subhashchandra Bos Hospital Tumsar
Number of vehicles and type of the vehicle:	NO
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:	No
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:	No
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	No
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	NO
Action taken,if any,and the result thereof:	Police Pending

Inspector of Police