



## FORM COMP AA

## REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	LAKHANI
CR.No./TAR NO./SDE NO:	154/2022 Sec, 2ve, 33u IPQhd/84 M.V. Act.
Date, Time & Place of accident:	09/08/2022 ,05:30 PM ,Sunrise Bar Samor Lakhani NH 53 Road
Name of the Injured/Deceased:	INJURED -1)VASANTA PRALHAD BORKAR AGE 49 AT POST PIMPALGAON/S 2) KARISHMA MOHAN PACHARE AGE 23 AT POST WARD NO 11 LAKHANI
Name of Hospital to which he/she was removed:	RURAL HOSPITAL LAKHANI
Number of vehicles and type of the vehicle:	TWO- ACUSED-BULERO PICK UP , INJURED-TWO WHEELER
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:	ACUSED-AKASH DAMODHAR GABHANE AGE 24 AT POST LAKHANI, RTO-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:	YASHWANT DOLIRAM BORKAR IAGE 23 YRS AT POST WAKESHWAR TAH 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:	MAGMA HDI GENERAL INSURANCE COMPANY LIMITED
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	P0022200024/4103/101481
Action taken, if any, and the result thereof:	FIR LODGED

*A. P. Tambe*  
Inspector of Police  
पोलीस निरीक्षक  
पोलीस स्टेशन लाखणी