

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

<b>Police Station:</b>	TUMSAR
<b>CR.No./TAR NO./SDE NO:</b>	250/2024,U/S-279 IPC
<b>Date, Time &amp; Place of accident:</b>	26/05/2024,TIME - 20/30 PM,Place - Sivnagar Tumsar
<b>Name of the Injured/Deceased:</b>	No
<b>Name of Hospital to which he/she was removed:</b>	NO
<b>Number of vehicles and type of the vehicle:</b>	MH 31/EK-4851,MARUTI SUZUKI CELERIO ZXI BS IV
<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>	RAVINDRA TARACHAND DAHEKAR Age-47 Year,At.Vinoba Nagar Tumsar,Dt.Bhandara
<b>The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:</b>	PRAVETE VEHICEL
<b>Name and address of the Owner of the vehicle as it stands on the date of the accident:</b>	RAVINDRA TARACHAND DAHEKAR Age-47 Year,At.Vinoba Nagar Tumsar,Dt.Bhandara
<b>Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:</b>	Tata AIG General Inshurance Co.Ltd. Vide Policy
<b>Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:</b>	62016310020000 IS VALID FROM 20-JUN-2023 TO 19-JUN -2024
<b>Action taken,if any,and the result thereof:</b>	Police Investion

Inspector of Police