

Date: 10-03-2025

[See Rules 253(c), 254(c) (iii), 254(80) 255(1) (iv)]

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

Police Station:	LAKHANI
CR.No./TAR NO./SDE NO:	CR. NO. 392/2024 SECTION 281,125(B) BNS R /W 184 M.V. ACT
Date, Time & Place of accident:	DATE- 28/09/2024 20/00 HRS PLACE - NH 53 RAOD PIMPALGAON SADAK
Name of the Injured/Deceased:	Injured - 1) Arun Gamaji Shinde Age 42 Year At- Udasa Tah-umred Dist - Nagpur 2) Sagar Dhakoba Shinde Age 32 Year At- Makardhokra Tah-umred Dist - Nagpur
Name of Hospital to which he/she was removed:	RURAL HOSPITAL LAKHANI TO Lakhsha HOSPITAL BHANDARA TO AIIMS NAGPUR
Number of vehicles and type of the vehicle:	CAR - HONDA CITY MH 35 P 7997
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:	ADITYA SHIVKUMAR AGRAWAL AGE 27 YEAR AT - SOUNDAD TAH - SADAK / ARJUNI DIST- GONDIA DRIVER LICENCE NO- MH3520160001081 RTI GONDIA
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:	SHIVKUMAR MAHABIR PRASAD AGRAWAL AGE 55 YEAR AT - SOUNDAD TAH - SADAK / ARJUNI DIST- GONDIA
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	RELIANCE GENERAL INSURANCE COMPANY LTD
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	POLICY NO- 992692423110005440 DATE 22/05/2024 TO 21/05/2025
Action taken,if any,and the result thereof:	FIR LODGED

*(Signature)*  
Inspector of Police

**Police Inspector**  
**Police Station Lakhani**