

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

<b>Police Station:</b>	KARDHA
<b>CR.No./TAR NO./SDE NO:</b>	CR.NO. 47/2025 SECTON 281,324(4),324(5) B.N.S.2023 R/W 184 MVACT
<b>Date, Time &amp; Place of accident:</b>	22/02/2024 TIME 01.20 PM, NH. 53 ROAD , SINGORI FHATA, TA.+DIST. BHANDARA
<b>Name of the Injured/Deceased:</b>	NO INJURED
<b>Name of Hospital to which he/she was removed:</b>	No Injured And Not Hospital
<b>Number of vehicles and type of the vehicle:</b>	MH 36 F 2204 , M/BOLERO CAMPER XL
<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>	PRAMOD SUBHASH MASRAM, Age 26 YEAR, AT. PIMPALGAON SADAR TA. LAKHANI DIST. BHANDARA WITHOUT DRIVER LICENSE
<b>The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:</b>	NO
<b>Name and address of the Owner of the vehicle as it stands on the date of the accident:</b>	SAMMAD DAUT BHURA AT. WARD NO. 03 LAKHANI DIST 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>	The Oriental Inshurance Company Limited
<b>Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:</b>	POLICE NO. 181301/31/2025/867 FROM 00.00 ON 29/07/2024 TO MIDNIGHT OF 28/07/2025
<b>Action taken,if any,and the result thereof:</b>	POLICE PENDING

Inspector of Police