

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

Police Station:	KARDHA
CR.No./TAR NO./SDE NO:	CR.NO. 03/2026 SECTION 281, 106(1) BNS R/W 184 MVACT
Date, Time & Place of accident:	03/01/02026 TIME 18/30 PM NH 247 ROAD, DAVADIPAR/BAJAR, BHANDARA.
Name of the Injured/Deceased:	DEAD 1) SUSHILA MADHUKAR KUCHEKAR, AGE 75 YEAR, AT DAVADIPAR/BAJAR TE.DIST. BHANDARA
Name of Hospital to which he/she was removed:	GENERAL HOSPITAL BHANDARA / DAVADIPAR/BAJAR, BHANDARA
Number of vehicles and type of the vehicle:	MH 33 G 1158 MAHINDRA BOLERO CAMPER
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:	MANGESH BHAGWAN HATWAR, AGE 36 YEAR, AT- SHRINAGAR TE.DIST. BHANDARA MAHARASHTRA , 441924 MH31
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:	MANGESH BHAGWAN HATWAR, AGE 36 YEAR, AT- SHRINAGAR TE.DIST. BHANDARA MAHARASHTRA , 441924
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LTD.
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	POLICY NO. 3379/04068236/000/01 POLICY ISSUE DATE FROM 19/09/2025 00:00 HOURS TO MIDNIGHT ON 18/09/2026
Action taken,if any,and the result thereof:	POLICE PENDING

Inspector of Police