



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	LAKHANI
CR.No./TAR NO./SDE NO:	CR . NO. 270 / 2020 SECTION 279,337, 338 ,304(A) IPC , R/W 184, M. V. ACT
Date, Time & Place of accident:	Date 29/09/2020 , 15/30 Hrs. Gadegaon Fata NH-6 Road
Name of the Injured/Deceased:	Death- Mukund Bhashkar Maske Age 32 Year, At Bhojapur Distt- Bhandara
Name of Hospital to which he/she was removed:	Rular Hospital Lakhani
Number of vehicles and type of the vehicle:	TATA ZEST CAR CG 04 /LH 8877
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:	Sunil Rajeshkumar Chabara Age 35 Year, New Krishna Nager Supela Distt- Durg (C. G.)
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:	Sunil Sing Sanjay Sing Sing Age 42 Year, 732/16 JayantNager Durg (C. G.)
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	NO
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	NO
Action taken,if any,and the result thereof:	FIR LODGED

Inspector of Police

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