



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	SIHORA
CR.No./TAR NO./SDE NO:	200/20 SECTION- 279.337 IPC R/W 184,134 MV.ACT.
Date, Time & Place of accident:	19/11/2020 TO 13/30 PM AT- RANERA, TAH TUMSAR DIST-BHANDARA
Name of the Injured/Deceased:	MAHADEV MANGARU PATLE AGE-61 YEAR AT-MURMADI TAH-TIRODA DIST-GONDIYA
Name of Hospital to which he/she was removed:	RURAL HOSPITAL SIHORA TAH- TUMSAR DIST-BHANDARA.
Number of vehicles and type of the vehicle:	1) UNKNOWN 2) MH-35 /U-9057 DISCOVER
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:	UNKNOWN
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:	NO
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:	POLICE INVESTIGATION

Inspector of Police

* System generated document no signature required