



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	BHANDARA
CR.No./TAR NO./SDE NO:	BHANDARA POLICE STATION C R NO 480/2020 SEC 279,304(A) I. P C. RW 134,184 M. V. ACT
Date, Time & Place of accident:	Date 20/12/2020 Time 10/30
Name of the Injured/Deceased:	Suresh Asharam Sende 45 Year At Arjuni / Punrvasan T. + D. Bhandara
Name of Hospital to which he/she was removed:	No
Number of vehicles and type of the vehicle:	MH 49 AT 5873
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:	Mohitkumar Pramod Kumar 26 Year At Mirapur Makan No. 126, T. Shahabad D. Rampur, Police Station Shahabad
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:	Pradeep Mohandas Parwani At 3 Rd Fwoor ,302 Mangalam Sharda Appt Ganeshpeth Police Station Nagpur MH 440032
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	RelianceGeneral Inshurance
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	R16122032914 DATE 16/12/2020 TE 15/12/2021
Action taken,if any,and the result thereof:	Deten

Inspector of Police

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