



## FORM COMP AA

### REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

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| <b>Police Station:</b>   | LAKHANI  |
| <b>CR.No./TAR NO./SDE NO:</b>  | CR.NO. 30/2021 SECTION 279,304(A) IPC R/W 184,134(B)187 MV ACT                         |
| <b>Date, Time &amp; Place of accident:</b>   | 11/02/2021, 11/10 Hrs. NH-6 Road Near K.k. Lown Lakhani                                |
| <b>Name of the Injured/Deceased:</b>   | Death-Prakash Balkrushna Hatnager Age 40 Year, AT- Sangadi Tah- Sakoli Distt- Bhandara |
| <b>Name of Hospital to which he/she was removed:</b>   | Gramin Ruganlay Lakhani  |
| <b>Number of vehicles and type of the vehicle:</b>   | S. T. BUS MH -40/ N 8819   |
| <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> | Rupesh Narendra Humne Age 33 Year, At Kamtee Distt- Nagpur                             |
| <b>The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:</b>   | YES  |
| <b>Name and address of the Owner of the vehicle as it stands on the date of the accident:</b>  | MSRTC  |
| <b>Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:</b>                        | No   |
| <b>Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:</b>                                     | NO   |
| <b>Action taken,if any,and the result thereof:</b>   | FIR LODGED   |

Inspector of Police

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