



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	MOHADI
CR.No./TAR NO./SDE NO:	42/21 SEC 279,337 IPC RW 184 MVA
Date, Time & Place of accident:	12/03/2021 To 18.00 PM
Name of the Injured/Deceased:	Satish Ravidra Bhagat Age 20 Year At. Kosami Tah. Lalbarha Dist. Balaghat (MP)
Name of Hospital to which he/she was removed:	R.H.Hospital Mohadi
Number of vehicles and type of the vehicle:	L2BL58214KM1190033 KOMAKI XGTKM E-BIKE (RSD),MP-50-MR/3723
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:	Pramod Harichandra Kohad Age 33 Year At Mohadi Dist Bhandara
The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:	--
Name and address of the Owner of the vehicle as it stands on the date of the accident:	L2BL58214KM1190033 KOMAKI XGTKM E-BIKE (RSD), Yogini Manoj Nimje Age 30 Year At Mohadi Dist Bhandara, MP-50-MR/3723 Ravidra Bhagat At. Kasmi Tah. Lalburra Dist. Balaghat
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	--
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	--
Action taken,if any,and the result thereof:	Crime Is Under To Investigation

Inspector of Police

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