



## FORM COMP AA

### REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

<b>Police Station:</b>	PAUNI
<b>CR.No./TAR NO./SDE NO:</b>	176-2021 SECTION 279,337,304 A IPC RW 184 MV ACT
<b>Date, Time &amp; Place of accident:</b>	11/07/2021 - 13/30 Between Road Of Betala To Wahi Village
<b>Name of the Injured/Deceased:</b>	Gangadhar Mahadev Mohadikar Age 54 Years Add-padma Ward Pauni D-bhandara
<b>Name of Hospital to which he/she was removed:</b>	Rural Hospital Pauni T-Pauni D-Bhandara
<b>Number of vehicles and type of the vehicle:</b>	TWO WHEELER MH 49/BP 3364
<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>	Late NIKHIL LAXMAN KAPATE AGE 25 YEARS ADD-LALGANJ TELIPURA NAGPUR
<b>The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:</b>	NO
<b>Name and address of the Owner of the vehicle as it stands on the date of the accident:</b>	MAYUR SURESH VAIDYA AGE 28 YEAR ADD-240 WITTHAL RUKMINI MANDIR JAWAL LALGANJ GUJARI ROAD NAGPUR
<b>Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:</b>	RELIANCE GENERAL INSURANCE
<b>Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:</b>	170522023750005812
<b>Action taken,if any,and the result thereof:</b>	INVESTIGATION

Inspector of Police

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