



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	MOHADI
CR.No./TAR NO./SDE NO:	167/21 SEC 279,337 IPC
Date, Time & Place of accident:	16/10/2021 To 19.30 At Kushari To Panjra Road
Name of the Injured/Deceased:	Shridhwaj Kacharu Selokar Age 55 Year At Panjra Tah. Tumsar Dist. Bhandara
Name of Hospital to which he/she was removed:	R.H.Hospital Mohadi
Number of vehicles and type of the vehicle:	MH-31/BW-0132
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:	Sagar Rupchand Elame Age 27 Yaer At. Panjra Tah. Tumsar, 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:	Krupal Charndas Tembunekar At. Kamal Chouk Nagpur
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:	Investigation

Inspector of Police

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