



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	WARTHI
CR.No./TAR NO./SDE NO:	69/2022 U/S 279 ,304(A) IPC R/W 184, 134, 187 MVA
Date, Time & Place of accident:	SATONA 02/05/2022 08/45 TO 9/00 AM
Name of the Injured/Deceased:	DEATH1) RAJU SHYAMRAO RAHANGDALE / 26 AT - WATOD NAGPUR 2) GEETA SHYAMRAO RAHANGDALE / 50 AT - WATOD NAGPUR
Name of Hospital to which he/she was removed:	GENERAL HOSPITAL BHANDARA
Number of vehicles and type of the vehicle:	TIPPER NO MH 36 AA/ 6461
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:	AJIT HEMRAJ BHOYAR /26 AT - DODMAZARI
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:	SAMIR KHEMRAJ SAMRIT /22 AT - DONGARGAV
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	MOTOR INSURANCE CERTIFICATE CUM POLICY SCHEDULE GCCV- PUBLIC CARRIES OTHER THAN THREE WHELLER PAKAGE POLICY ZONE C
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	POLICY NO 181301/31/2022/1580 14 NOV 2018 TO 13 NOV 2023
Action taken,if any,and the result thereof:	OFFENCER REGISTRED POLICE STATION WARTHI

Inspector of Police

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