



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	WARTHI
CR.No./TAR NO./SDE NO:	CR NO.116/2022 U/S 279,337,338 IPC
Date, Time & Place of accident:	DABHA NEAR JALSA LWAN DATE -28/07/2022 TIME 20/00 TO 20/30 PM
Name of the Injured/Deceased:	INJURED -1) RAJU DAYARAM EANJARI /50 AT -BHANDARA 2) PRADIP NANDALAL KAMBALE /52 - AT -BHANDARA
Name of Hospital to which he/she was removed:	JANRAL HOSPITAL BHANDARA
Number of vehicles and type of the vehicle:	AATO RIKSHYA MH -36/3032
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:	SANJAY UTTAMRAV CHAWHAN /48 AT - SUBHAS WARD WARTHI
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:	SANJAY UTTAMRAV CHAWHAN /48 AT - SUBHAS WARD WARTHI
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	UNKWON
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	UNKWON
Action taken,if any,and the result thereof:	OFFENCER REGISTER POLICE STATION WARTHI

Inspector of Police

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