



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	LAKHANI
CR.No./TAR NO./SDE NO:	214/2022
Date, Time & Place of accident:	11/10/2022 On 16/30 PM At- Nanori/ Dighori Th- Lakhani
Name of the Injured/Deceased:	Injured- Ravindra Ramesh Shahare Age- 35 Years, At- Nanori/ Dighari TH- Lakhani
Name of Hospital to which he/she was removed:	Rural Hospital Bhandara To Civil Hospital Bhandara
Number of vehicles and type of the vehicle:	MOTAR CYCLE BAJAJ DISCOVER NO. MH- 36/ P- 0768
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:	Naman Bhagwanta Chendekar Age- 23 Years At- Karadha Dist- Bhandara
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:	Gunwanta Tukram Chandekar, Age- 52 Years, At- Karadha Dist- Bhandara
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	No
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	NO
Action taken,if any,and the result thereof:	FIR, LODGED

Inspector of Police

* System generated document no signature required