



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	TUMSAR
CR.No./TAR NO./SDE NO:	253/2017
Date, Time & Place of accident:	14/08/2017 21/30 Pm
Name of the Injured/Deceased:	Jaykishan Balkrushna Chawke Age 45 Add- Hasara, Ta Tumsar, Dist Bhandara.
Name of Hospital to which he/she was removed:	Subhashchandra Bose Hospital Tumsar.
Number of vehicles and type of the vehicle:	MH31/AS6299 HEROHONDA SPLENDOR PLUS
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:	Brijesh Balwant Mete Age 36 Add- Shiwaji Nagar Tumsar
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:	Vishal Nanaji Kundavar Age 35 Add- Quarter No. 19 Indraprast Apartement 8th Flour Lxmi Nagar Square Nagpur.
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	No Insurance
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	NO INSURANCE
Action taken,if any,and the result thereof:	...

Inspector of Police

* System generated document no signature required