## From COMP AA

## (See Rules 253,(c),254(c)(iii),254(80255(1)(iv)

## REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

| 1  | Name of Police station                                      | Basmat Rural Police Station Date 22/02/2024       |
|----|---|---|
| 2  | CR NO/Tar no /Sde No  | 55/2024 IPC 304A 279, 337,338                     |
| 3  | Date time and place of the                                  | Date 18/02/2024 at 18:00 At Near Basmat TO Nanded |
|    | accident  | Road.   |
| 4  | Name of injured/Deceased                                    | injured – Govind Keshavrao Fegde R/O Reulgav TQ   |
|    |   | Basmat Dist Hingoli                               |
| 5  | Name of hospital to which                                   |   |
|    | he/she was removed  |   |
| 6  | Number of vechile and type of                               | CAR MH 12 TN 1241                                 |
|    | the vechile   |   |
| 7  | Name and address of the driver                              | CAR MH 12 TN 1241                                 |
|    | of vechile with particulars or                              |   |
|    | Driving license of the side                                 |   |
|    | driver and the address of the                               |   |
|    | issuing authority of the side                               |   |
|    | driving license the no of badge                             |   |
|    | in case of public service vehicle                           |   |
|    | and the address of the issuing                              |   |
| 0  | authority of the side badge                                 |   |
| 8  | Name of address of owner of the vehicleas it stands date of |   |
|    | accident  |   |
| 9  | Name and address of the                                     |   |
| 9  | insurance campony with whom                                 |   |
|    | the vehicle was insured and the                             |   |
|    | divisional office the side                                  |   |
|    | insurance campony   |   |
| 10 | No of insurance policy/                                     |   |
|    | insurance certificate and the                               |   |
|    | date of validity of insurance                               |   |
|    | policy/ insurance certificate                               |   |
| 11 | Action taken if any and the                                 | As above  |
|    | result there of   |   |
|    |   | Police Inspector                                  |
|    |   | Basmat Rural Police Station                       |
|    |   |   |