FROM COMP A A

[See Rules 253 @,254 (c) (iii) , 254 (1) (iv)]

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

1	Name of the police station	JUNA RAJWADA POLICE STATION, KOLHAPUR
2	CR NO/TAR No./SDE No.	CR NO 365/2026,BNS 281,125 (A),(B), 324(4) MV ACT – 184 DATE – 24/06/2026 TIMING – 20.34,ENTRY NO- 35
3	Date Time and place of the accident	DATE 24/06/2026 TIMING 11.00, HOCKEY STADIUM TO KALMBA JAILKADE JANARE MARGAVAR NIRMITI CORNER CHAUK,KOLHAPUR
4	Mame of the ijured / Deceased	IJURED – NATHA BHAU KAMBALE, AGE – 62, ADD – AT POST – BACHANI, TAL – KAGAL, DIST – KOLHAPUR.
5	Name of Hospital to which he/ she was removed.	C. P. R.HOSPITAL, KOLHAPUR
6	Number of vehicles and typd of the vehicles	1) TWO WHEELER NO - MH-09-CF-9055 2) KMT NO - MH-09-GJ-0906
7	Name and address of the Driver of the vehicle with particulars or Drriving Licenseof the side Driver and the address of theIssuing Authority of the said Driving License The number of Badge in case of Public Service Vehicle and the address of the Issuing Authorityof the said Badge.	NAME – SUNIL DNYANDEO PETKAR ADD – 1981, D WARD, BURUD GALLI, SHANIVAR PETH, KOLHAPUR LICENSE NO- MH0919910013297 RTO – KOLHAPUR RTO MCWG - 14-12-2009 VALIDITY – 12-10-2030
8	Name and address of the owner of the vehicle as it stands on the date of the accident.	NAME – KOLHAPUR MUNICIPAL TRANSPORT ADD –AT/POST – SHRI SHAHU CLOTH MARKET, NORTH WING 1 ST FLOOR, C WARD, SOMVAR PETH, TAL – KARVEER, KOLHAPUR
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance company.	COMPANY – DICRECTORATE OF INSURANCE, MAHARASHATRA STATE, MUMBAI ADD – 264, GRUHNIRMAN BHAVAN (MHADA), 1ST FLOOR, OPP. KALANAGAR, BANDRA(E), MUMBAI
10	Number of insurance policy/Insurance Cirtificate and the Date of Validity of the insurance policy	POLICY NO- 2526C2PCIPN00680 VALIDITY – 03-09-2026
11	Action taken if any and the result thereof	TAPASAVAR
12	Inspector of police	SHRI KIRAN LONDHE
13	Police station	JUNA RAJWADA POLICE STATION KOLHAPUR