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 43/2026 BNS 281,125 (A),(B) MV ACT – 184, 134(B) DATE – 24/01/2026 TIMING – 23.35 ENTRY NO-59
3	Date Time and place of the accident	DATE 22/01/2026 TIMING 12.30 NANGIVALI CHAUK TE MIRAJAKAR TIKATI ROADVAR NANGIVALI CHAUK MADHE, ROADVAR KOLHAPUR
4	Mame of the ijured / Deceased	IJURED (FIRYADI) 1) MOHAN NAGNATH POWAR, AGE – 58, ADD – 711 A WARD, RAJARAM CHAUK, TIMBER MARKET, KOLHAPUR
5	Name of Hospital to which he/ she was removed.	GAJANAN ORTHOPEDIK CENTER HOSPITAL, KOLHAPUR
6	Number of vehicles and typd of the vehicles	1) TWO WHEELER NO - (FIRYADI) MH-09-FC-5782
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.	UNKONON LICENSE NO- RTO - MCWG- VALIDITY –
8	Name and address of the owner of the vehicle as it stands on the date of the accident.	UNKONON
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance company.	TWOWHEELER NO - UNKONON Insurance company –
10	Number of insurance policy/Insurance Cirtificate and the Date of Validity of the insurance policy	POLICY NO- VALIDITY -
11	Action taken if any and the result thereof	TAPASAVAR
12	Inspector of police	SHRI KIRAN LONDHE
13	Police station	JUNA RAJWADA POLICE STEATION KOLHAPUR