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 58/2026 BNS 281,125 (A),(B) MV ACT – 184, 134(A)(B) DATE – 04/02/2026 TIMING – 15.30ENTRY NO-62
3	Date Time and place of the accident	DATE 03/02/2026 TIMING 20.00 NANGIVALI TE SAMBHAJINAGAR YA ROADVAR SANDIP MEDICAL JAVAL, KOLHAPUR
4	Mame of the ijured / Deceased	IJURED (FIRYADI) 1) BALKRUSHANA RAJARAM REDEKAR, AGE – 65, ADD- GHAR NO. 2726 B WARD, MANDLIK GALLI, BELBAG, MANGALVAR PETH, KOLHAPUR
5	Name of Hospital to which he/ she was removed.	GURUPRASAD MULTI SPECIALITY HOSPITAL, KOLHAPUR
6	Number of vehicles and typd of the vehicles	1) TWO WHEELER NO MH -13-BW-0036
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.	1) ROHAN RAVINDRA POWAR , AGE – 21, ADD – 1835, B WARD, MALHAR APARTMENT, PANYACHA KHAJINA, MANGALVAR PETH, KOLHAPUR. LICENSE NO- NO RTO - MCWG- VALIDITY –
8	Name and address of the owner of the vehicle as it stands on the date of the accident.	GUMATE KUNDANLAL NARSING, ADD – PLOT NO/B75, PRALHAD NAGAR BEHIND S R P, CAMP VIJAPUR ROAD, INDIRANAGAR (N-V) SOLAPUR.
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 - MH -13-BW-0036 Insurance company – TATA AIG INSURANCE COMPANY LIMITED.
10	Number of insurance policy/Insurance Cirtificate and the Date of Validity of the insurance policy	POLICY NO- 01744840950000 VALIDITY -16/06/2025
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