FORM COMP AA

1	Name of the police station	Kurundawad Dist. Kolhapur.
2	Apghat No.	Nival Apghat no 80/2026.
3	Date, Time and Place of the accident	Date - 10/03/2026 Time – 21.45pm on shirol to kurundwad road shivtirth chouk kurundwad tal shirol. Dist kolhapur.
4	Name of the injured/Deceased	Name – 1) mayur lakshman lugade age 32 a/p omkar chouk ghalvad tal shirol. Dist kolhapur. (Dead).
5	Mane of the hospital to which he/she was roved	Miraj civil hospital miraj dist sangali
6	Number of the vehicles and type of the vehicale	1) Splender motor cycle MH 12 BW 7489 2) Tempo -KA 28 AA 9552
7	Name and address of the driver of the vehicale with particulars or driving license of the said driver and the address of the issuing authorty of the said driving the number of badge in case of public service vehicle and the address of the issuing authorty of the said badge	1) sadashiv basayya hiremath age 35 a/p sarvad tal vijyapur dist vijayapur state karnataka
8	Name and address of the owenar of the vehicle as it stand on the date of the accident	sadashiv basayya hiremath age 35 a/p sarvad tal vijyapur dist vijayapur state karnataka
9	Name and address of the insurance company with whom the vehicle was insured and the divisional office of the said insurance company	No information
10	Number of insurance policy/ insurance certificate and the date of valid 88 ity of the insurance policy/ insurance certificate	No information
11	Action taken, if any and the result there of	BNS sec – 106(1), 281, 125(A), 125(B), 324(4) MV Act -184, 119
12	Inspector of police	API S.M.Mane

13	Police station	Kurundawad Police station.