Form - Comp.AA

(See rules 253(c), 234(5)(III) 254(2) 255(I) (iv))

REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS

01	Name of Police Station	Shirpur
02	CR.NO/TAR NO/SDE No	97/2026 section 106(1),281 BNS r/w section 184 MV act
03	Date Time and Place of the Accident	At Keshavnagar TQ Risod Dist washim Date 14/02/2026 time 18/45
04	Name of th Injured/Deceased	Vasanta Pralhad Mandalkar age 60 years r/o Keshavnagar TQ Risod Dist washim
05	Name of Hospital to which he/she was removed	District Hospital washim
06	Number of vehicles and type of vehicle	E bike (Without Number) Pickup MH 38 X 4195
07	Name and address of the Driver of the vehicle with particulars Driving License of the said Driver and the address of the issuing authority of the said driving license the number of badge in case of Public service Vehicle and the address of the issuing authority of the said badge	1) Deceased Vasanta Pralhad Mandalkar age 60 years r/o Keshavnagar TQ Risod Dist washim (without license) 2)Arjun Tukaram Amale age 22 years occupation- Driver r/o Bhurkyachi Vadi TQ Sengaon Dist Hingoli Driving License No- MH38 20250002596 Issuing authority- RTO Hingoli
08	Name and the address of the owner of the vehicle as it sends on the date of the accident	1) Vasanta Pralhad Mandalkar age 60 years r/o Keshavnagar TQ Risod Dist washim 2) Tukaram Amale occupation- Labour r/o Bhurkyachi Vadi TQ Sengaon Dist Hingoli
09	Name and address of the insurance company with whom the vehicle was insured and the divisional officer of the said insurance Company	SBI GENERAL INSURANCE COMPANY
10	Number of Insurance Policy/Insurance certificate and the date of validity of the insurance Policy/Insurance certificate	MIB/1479314
11	Action taken if any and the result thereof	Investigation is completed and chargesheet is submitted in hon. Risod Court
12	In charge of Police Station	Police inspector Keshav wagh shirpur jain police station

Signature and Stamp

पोलीस निरीक्षक
पो.स्टे.शिरपूर जि.वाशिम