FROM COMP AA

[See Rules 2530,254(c)(iii), 254(80),255(1)(iv)]

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1	Name of the police station	Sindhudurgnagri
2	CR.No./Tar.no./SDE.No.	CR NO 09/2026, BNS - 106(1), 281, 125(a), 125(b), 324(4) MV ACT- 184, 3(1)181
3	Date, time and place of the accident	Date - 30/01/2026 Time - 19.00 Place - Oros, LAY BHARI HOTEL SAMOR Tal - Kudal, dist - sindhudurg
4	Name of the anjured/Deceased	1. Basppa Shivanand Kaldeep, age 55, address khargewadi taluka kuda district Sindhudurg (FETAL)
5	Name of hospital to which he/she was removed	1. Dist. Hospital Sindhudurg, Oros, Tal - Kudal
6	Number of vehicles and type of the vehicle	TWO WHEELR no - MH-07-R-4667
7	Name and address of the Driver of the vehicle with particulaes or Driving License of the said Driver and the address of the Issuing Authority of the said Driving License. The number of Badge in case od public Service Vehicle and address of the issuing Authority of the said badge	Basppa Shivanand Kaldeep, age 55, address khargewadi taluka kuda district Sindhudurg DL NO. - .....NA....
8	Name and address of the owner of the vehicle as it stands on the date of the accident.	1. SANJAY MANOHAR REVDEKAR 76, S/SAYEWADI, NANDGAON TAL KANKAVALI DIST.SINDHUDURG.
9	Name and address of the Insurance campany with whom the vehicle was insured and the divisional office of the said insurance company.	.....NA.....
10	Number of insurance policy/Insurance certificate and the date of validity of the insurance policy/insurance certificate	.....NA.....
11	Action taken if any, and the result thereof.	The ABITED FINAL send to Court

(S. D. LAVHE)
ASSI. POLICE INSPECTOR
POLICE STATION OFFICER
SIDHUDURGNAGARI