FORM COMP AA

[See Rules 253 (C), 254 (e)(iii), 254 (80 255(1)(iv)]

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1	Name of the Police Station	Kudal Police Station
2	CR.NO Section	CR NO 342/2025 BNS ACT 106 (1), 281, 125 (a), 125 (b), MV ACT 184.
3	Date, Time and Place of the accident	Date- 05.10.2025, Time- 02.45 Pm At- Mumbai-Goa haighway, Pinguli, Near Vad Ganesh Temple, Tal- kudal, Dist- Sindhudurg
4	Name Of the Deceased	Pandurang Narayan Ghatval, Age-75 Years, Add- Nivati, Tal- Vengurla, Dis - Sindhudurg
5	Name of Hospital to which he/she was removed	Government Medical Collage And Hospital Sindhudurg-Oros
6	Number Of Vehicles and type of the vehicles	1 ST Bus- MH 14 BT 4932
7	Name and address of the Driver of the vehicle with particulars or Driving License of the saod driver and the address of the issuing authority of the said Driving License. The number of Badge in case of Public Service Vihicle and the address of the Issuing Authority Of the said Badge	ST Bus Driver Name - Nagesh Eknath Patil Add :- Yelvade, Tal-Radhanagari, Dist- Kolhapur Driving License No- MH09 20090017227
8	Name and address of the Owner of vehicle as it stands on the date of the accident.	M.S.R.T.Corporation Kudal
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance Company	NO
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	NO
11	Action taken,, if any, and the result there of	RCC No- 109/2025 Inspecter of Police Kudal Police Station

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