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 80/2025, BNS - 281, MV ACT 184
3	Date, time and place of the accident	Date - 24/12/2025 Time - 02.00 Place - Oros, Tal - Kudal, dist - sindhudurg
4	Name of the anjured/Deceased	....NA....
5	Name of hospital to which he/she was removed	....NA....
6	Number of vehicles and type of the vehicle	TRUCK no - MH 12 TV 2216
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	1. PARMESHWAR DADARAO HARALE, ADD - WAGHALA, PARLI, DIST BEED PARLI, BID, PIN: 431517 D.L. NO. - MH44 20090002648 issuing authority - MH 44
8	Name and address of the owner of the vehicle as it stands on the date of the accident.	1. ARUN BIBISHAN BORADE, Address - GAT NO 825 RAVALEKAR WASTI, KOLWADI TAL HAVELI DIST PUNE,, Pune, MH, 412207
9	Name and address of the Insurance campany with whom the vehicle was insured and the divisional office of the said insurance company.	SHRIRAM GENERAL INSURANCE COMPANY LIMITED E-8, EPIP, SITAPURA INDUSTRIAL AREA, JAIPUR, RAJASTHAN-302022
10	Number of insurance policy/Insurance certificate and the date of validity of the insurance policy/insurance certificate	1. policy no. 215037/31/25/009515 date - 07/01/2025 to 06/01/2026
11	Action taken if any, and the result thereof.	The Charge Sheet send to Court

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