

Accident Compensation

Police Station	Nashirabad Police Station
CR.No./TAR No./SDE No.	
Date time and place of the accident	2017-08-09 20:08
Name of the Hospital to which he/she was removed	sarala hospital jalgoan ,om criticle and ceur center jalgoan
Number of vehicles and type of vehicles	two whiller hero honda splendor plus mh-19-bb-9873,tata mh-19-z3085
Name and address of Driver of the vehicle with particulars 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 of Public Service Vehicle and the address of the Issuing Authority of the said Badge.	tata owner dayaram tukaram sapkale add paldhi dist dharangaon two whiller owner ranesh sonu bonde age 61 add- nashirabaad
Name and address of Owner of the vehicle as it stands on the date of the accident	two whiller woner add nashirabad date 8/8/2017
Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	tata moter nationnal insurance kolcatta
Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy/ Insurance Certificate	date 30/6/2017 to 29/6/2018
Action taken,if any, and the result thereof	both whechel inspection