

Accident Compensation

Police Station	Nashirabad Police Station
CR.No./TAR No./SDE No.	nashirabad ps bhag 5 cr no 47/2017
Date time and place of the accident	2017-10-23 19:30
Name of the Hospital to which he/she was removed	godavari hospitle jagoan khurd
Number of vehicles and type of vehicles	bajaj palsar mh 41-w8802, marut vegner no mh 19 bu 3495
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.	mahendra pandit choudhari , add khadaka tal bhusawal mh 1920090047508,
Name and address of Owner of the vehicle as it stands on the date of the accident	mahendra pandit choudhari tarsod fata nh 6 date 23/102017
Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	bajaj palsar insurance bajaj aliance malegoan
Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy/ Insurance Certificate	marut vegnar insurances no icici insurans mumbai date 22/11/2017 todate 21/12/17
Action taken,if any, and the result thereof	technycle inspection bodh vhecle by rto