

Accident Compensation

Police Station	Nashirabad Police Station
CR.No./TAR No./SDE No.	nashirabad ps moter Apghat no /
Date time and place of the accident	2017-11-14 05:00
Name of the Hospital to which he/she was removed	no injure
Number of vehicles and type of vehicles	cemicle tankar no mh-46-h-7788
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.	dravir name amir khan murtija khan add mumbai kalam goi nvi mumbai licence no up 5220140013091
Name and address of Owner of the vehicle as it stands on the date of the accident	nh 6 var chimade petrol pump beside on rode
Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	new india inshurance company mumbai
Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy/ Insurance Certificate	date 27/1/2017 to 26/1/2018
Action taken,if any, and the result thereof	m v act 184 ,fine