

Accident Compensation

Police Station	Mehunbare Police Station
CR.No./TAR No./SDE No.	-Mehunbare ps -CR- No.102/2017 IPC 279,337,427, M.v.act 184.
Date time and place of the accident	2017-10-27 09:30
Name of the Hospital to which he/she was removed	-Shinde Hospital chalisgaon
Number of vehicles and type of vehicles	-paggo ape auto & Tata ace zip
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.	- paggo ape auto no. MH-19 AX-0882 Drivar
Name and address of Owner of the vehicle as it stands on the date of the accident	-Dipak kartik nikam at-devli Tal-chalisgaon dist- jalgaon Date-27-10-17 at 09.30
Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	-united india inssureance company limited.
Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy/ Insurance Certificate	- Policy no. 2305823116p101697278 midnight on 06/05/2017.
Action taken,if any, and the result thereof	- . Sd/-- Police Inspector, ----- Police Station, Dist.Jalgaon.