

Accident Compensation

Police Station	Nashirabad Police Station
CR.No./TAR No./SDE No.	moter apghat no -2/2018
Date time and place of the accident	2018-01-23 19:40
Name of the Hospital to which he/she was removed	no injury
Number of vehicles and type of vehicles	balono car no-gj-16-cb-5483 , MAHINDRA PICK UP MH-28-AB-4664
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.	BALONE CAR NO DRIVER NAME TUSHAR SURESH RANE LICENNSE NO MH 05-20070002629 MAHINDRA PICK UP DRIVER NAME ANIL RAMKRUSHNA HINGANKAR
Name and address of Owner of the vehicle as it stands on the date of the accident	NAME ONER BALENE CAR TUSHAR SURESH RANE YES HE IN PRESENT ACCIDENT PLESE
Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	BALENO CAR NO -GJ -16 CB 5483 INSURANCE -MARUTI INSURANCE BOOKING PRIVET LMD NAVI DILLI PICK UP - MH-28 AB-4664 INSURANCE BJAJ ALILIANZ PUNE
Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy/ Insurance Certificate	CAR NO -GJ 16CB-5483 INSURANCE VALIIDITY 9-12-17 TO 8-12-18 PICK AR INSURANCE VALIDITY 20-1-17 TO 29-1-18
Action taken,if any, and the result thereof	M.V ACT -184 FINE 1000