


FORM

[See Rules 253 , 254 (iii), 254 (1) (iv)]
REPORT ABOUT THR MOTOR VEHICLES ACCIDENTS

1	Name of the Police Station	:-	Sawantwadi
2	CR No/TAr No/SDE No	:-	Cr No.98 / 2022
3	Date ,Time and place of the Accident	:-	20/01/2022 as on 17.30 at Nhaveli titha Tal- Sawantwadi
4	Name of the injury/Deceased	:-	1. Roshan Ravindra Pawar age-21 years 2. Yuvraj Krishna Parab age - 21 Years
5	Name of the Hospital to which he/she was removed	:-	1.Sub district hospital sawantwadi Tal -Sawantwadi , , 2.Goa Medical college ,Bambuli Goa
6	Number of vehicles and type of the vehicles	:-	Mahindra maximo No- GA -07 F- 3710 (Accused) Honda Shine Motorcycle no MH -07 AM- 6763
7	Name and Address of the Driver of the vehicles with particulars or Driving License of the said Driver and the address of the Issuing Authority of the said Driving Licence. The Number of Badge in case of Public Service Vehicle and the address of the Issuing Authority of the said Badge.	:-	Sunder Baburao Parsekar Age -38 Years At and Post - Nhaveli , Parsekarwadi Tal- Sawantwadi (Accused) Roshan Ravindra Pawar age-21 years At and Post - Charatha Tal- Sawantwadi (Witness) Licence No MH 09 20210022595
8	Name and address of the Owner of the vehicles as it stands on the date of the accident.	:-	----- Rama Suresh Gawas at post- Bhedshi tal -Dodamarg
9	Name and address of the Insurance Company with whom the vehicles was insured and the Divisional officer of the said Insurance Company	:-	----- The oriental insurance company limited Branch - Kankavali dist- Sindhudurg
10	Number of Insurance Policy/Insurance Certificate and the date of validity of the Insurance Policy/Insurance Certificates.	:-	-----

			164501 /31/2020/4502 Dated:- 05/10/2019 To 04/10/2024
11	Action taken if any and the result there of.	:-	Chargesheet file
 Inspector of Police Sawantwadi police Station			
12	N.B.:- This form should a company with all the necessary document viz (1) FIR. (2) Panchanama (3) Medical Certificate		