

FORM
[See Rules 243] 248(iii), 248(i) (iv)]
REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

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| १ | Name of the Police Station | Sawantwadi |
| २ | CR No | Cr No. ०२/२०२३ |
| ३ | Date, Time and Place of the Accident | ०५/०१/२०२३ as on ०२.०० am. at Vengurla to Belgam Road AMBOLI GHAT Tal-sawantwadi, sindhudurg |
| ४ | Name of the Injury/Deceased | १. Rajesh Shashikant Jacak, A/p. Jagtapwadi Devagad Dist- Sawantwadi [injured person] २. Sandip Sudhir Surve, A/p. ४०८० A, Kuranwasdi peth Killa Ratnagiri Dist- Ratnagiri [injured person] |
| ५ | Name of the Hospital to which he/ she was removed | Primary Health Center Amboli |
| ६ | Number of vehicles and type of the vehicles | two vehicles १. Tata Truck No KA-२२-D-४००८ २. Tata xenon yodha pickup BSIV No. KA-२२-D-२०५७ |
| ७ | 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. | १. Rajesh Shashikant Jacak, A/p. Jagtapwadi Devagad Dist- Sawantwadi VEHICLE TYPE Tata xenon yodha pickup BSIV No. KA-२२-D-२०५७ Authority- MH०७ Licence No. mh०७ ११९८०००२६४० २. Bhagwan Dimappa dalwai A/p Valmiki Nagar, ६१०, Yarazrvi Dist Belgavi -५१११११ VEHICLE TYPE Tata Truck No KA-२२-D-४००८ Authority- MH०२ Licence MH०२ २०००००७०६९ |
| ८ | Name and address of the Owner of the vehicles as it stands on the date of the accident. | १. Tata xenon yodha pickup BSIV No. KA-२२-D-२०५७ -Malikarjun Dilawar Jakati, A/p. २३९/१ Janata Galli Pant Balekundri B.K. Belgam A/P. ChikaneWadi Sawargaon Tal Parner Ahamadnagar ४१४ ३०४ २. Tata Truck No KA-२२-D-४००८ - Arjun Dalawai, A/p Valmiki Nagar, ६१०, Yarazrvi Dist Belgavi -५१११११ |
| ९ | Name and address of the insurance Company with whom the vehicles was insurance and the Divisional officer of the said Insurance Company | CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LIMITED |
| १० | Number of insurance policy/ insurance Certificate and the date of validity of the insurance policy/ insurance certificates | १. INNOVA २.५ BD VX/STR E NO. MH०४FG२२२३ Policy No. ३३३६२/०२०९४६२५/०००/०० Validity of the insurance policy ३०२/०९/२०२१ to ०१/०९/२०२२ २. BUS CITY RIDE SKL LP NO. T०९२२GA४६१०A Policy No. ३ CTP०९३०८२५८७२ Validity of the insurance policy ३०६/०९/२०२२ to ०५/०९/२०२३ |
| ११ | Action taken if any and the result there of | RTO INSPECTION |
| १२ | N.B:- This form should a company with all the necessary document viz १) FIR २) SPOT PANCHNAMA | |