

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

1	Name of Police station	Akhada Balapur Police Station Date 12/12/2025
2	CR NO/Tar no /Sde No	747/2025 Us 324(3), 281 BNS 2023
3	Date time and place of the accident	Date 12/12/2025 at 15. 30 PM front of new bus stand road
4	Name of injured/Deceased	
5	Name of hospital to which he/she was removed	
6	Number of vehicle and type of the vehicle	1) Four Wheeler No.MH 02 BG 1963 2) Four wheeler No MH 20 BL 3570
7	Name and address of the driver of vehicle with particulars or Driving license of the side driver and the address of the issuing authority of the side driving license the no of badge in case of public service vehicle and the address of the issuing authority of the side badge	1) Four Wheeler No.MH 02 BG 1963 2) Four wheeler No MH 20 BL 3570
8	Name of address of owner of the vehicle as it stands date of accident	----
9	Name and address of the insurance campony with whom the vehicle was insured and the divisional office the side insurance campony	----
10	No of insurance policy/ insurance certificate and the date of validity of insurance policy/ insurance certificate	----
11	Action taken if any and the result there of	As above
		Police Inspector Akhada Balapur Police Station