## "FROM COMP AA" [See Rules 253©(iii),254 (80 255(1) (iv)] REPORT ABOUT THE MOTER VEHICLES ACCIDENTS

1	Name of The Police Staion	&	Lonavala city police staion, pune rural
2			CR no – 453/2020 IPC 279,337,338, MV Act 184, 18(2)/177
4	Cr.No/TAR.No/SDE No.	&	Date = 25/09/2020 Time = 16:17 pm
<u></u>	D . MI INI CCC II	_	SDE No - 15/2020.
3	Date Time and Place Of Accident	&	Date - 25/09/2020 Time Morning - 03:50 am
			Lonavala Valvan gov Tal - maval dist pune old pune Mumbai (NH
			4) highway road near Riddhi Siddhi hotel
4	Name Of The Injured/Deceased	&	<b>Injured Name</b> – 1) Rushikesh Sudam Bothre age 26 year Add-At
			<ul> <li>Post - Khalumbre, tal-Khead, dist - pune (Verna Car Driwar)</li> </ul>
			2) Amit Laxmain Shivekar Age 22 Tear Add - At - Post Kunegoan,
			Tal – Maval, Dist – Pune. (Verna Car Passengers)
5	Name Of Hospital To Which He /She	&	Lokmany Hospital Nigdi Pune.
	Was Removed.	· ·	Dominary 1105picar (vigar) arie.
6	Name Of Vehicles	&	1) Verna Car No – MH/14/JE/7519
0	value of venicles	α	2)Tempo No – MH/43/U/3884
7	Name Of Vehicles no - 1	&	1) Verna Car No – MH/14/JE/7519
/			, , , ,
	A] Vehicles Driver Name and	&	1) Rushikesh Sudam Bothre age 26 year Add - At - Post -
	Adrees	_	Khalumbre, tal-Khead, dist - pune (Verna Car Driwar)
	B] Driver licens no.	&	1) MH-14-20160032517
	C] Driving licens And Address	&	RTO - Pimpri Chinchvad Dist - pune
	Of The Issuing Atuthority		
	D] The Number Of Badge.	&	Nil
	E] The Public SerVice Vehicle	&	Nil
	And The Address Of The		
	Issuing Atuthority		
8	Name And Adderss Of The Owner OF	&	Mr. Gorakshanath Shivaji Mane Adrees - At - Post - Khalumbre,
	The Vehical As It Stands On The Date	_	tal-Khead, dist - pune.
	Of The Accident		tai Micaa, aist pane.
9	Name And Adderss Of The Said	&	1) Liberty General Insurance LTD.
9	Insurance Company With Whom The	α	Adrees – Office No – 601, ABC and 602AB 6 <sup>th</sup> Floor, City Tower,
	Vehicle Was Insured And The		
			Boat Club Road, Pune 411001.
	Divisional Office Of The Said		
40	Insurance Company	_	2044400204200005500000
10	Name Of Insurance Certificate And	&	201140030120800056000000
	The Date Of Validity Of The Insurance		DATE - 10/08/202020 TO 09/08/2021
	Policy/ Insurance Certificate.		
11	Name Of Vehicles no - 2		2)Tempo No - MH/43/U/3884
	A] Vehicles Driver Name and		Prakash Popat Vyavhare Address - At - Post - Kanhur Pathar, Tal
	Adrees		– Parner Dist – Ahmadnager 414302
	B] Driver licens no.		MH/16/20100007620
	C] Driving licens And Address		RTO - Ahmadnager Dist - Ahmadnager
	Of The Issuing Atuthority		-
	D] The Number Of Badge.		Nil
	E] The Public SerVice Vehicle		Nil
	And The Address Of The		
	Issuing Atuthority		
12	Name And Adderss Of The Owner OF		Prakash Popat Vyavhare Address – E-36, A/2, Sector 10, Nerul,
	The Vehical As It Stands On The Date		Navi Mumbai, Thane 400706.
	Of The Accident		naninalij ilialie 100/00.
13	Name And Adderss Of The Said		SBI General Insurance Company LTD
13	Insurance Company With Whom The		Address - Natraj 301, Junction Of Western Express Highway &
	Vehicle Was Insured And The		Andheri Kurla Road, (East) Mumbai 400069.
	Divisional Office Of The Said		
	Insurance Company		
14	Name Of Insurance Certificate And		000000014752229
	The Date Of Validity Of The Insurance		09/10/2019 TO 08/10/2020
	Policy/ Insurance Certificate.		
15	Action Taken, If any, and the Result	&	1] Against the Tempo No - MH/43/U/3884 Vehical Driver Name

	Thereof		Prakash Popat Vyavhare Address – E-36, A/2, Sector 10, Nerul,
			Navi Mumbai, Thane 400706 of crime according to the complaint
			filed under section IPC 279,337,338 MV Act 184, 18(2)/177
			Result Thereof -
			The Crime Is On The Investigation
16	Investigating Officer	&	(S.B.SHINDE)
			Assistant Police sub-Inspector
			Lonavala city police staion
			( pune rural)