

FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	BHANDARA
CR.No./TAR NO./SDE NO:	1750/2025
Date, Time & Place of accident:	23/12/2025 Time 1.30 To 2.00 Place Of Accident Gunjepar Bhandara
Name of the Injured/Deceased:	ROHIT PRADEEP SHARMA At BDCC BANK RAJGOPALCHARI WARD CIVIL LINE BHANDARA, BHANDARA MAHARASHTRA
Name of Hospital to which he/she was removed:	Civil Hospital Bhandara
Number of vehicles and type of the vehicle:	MH36AL0314 SWIFT ZXI+
Name and address of the driver of the vehicle with particulars or Driving license of the said Driver and the Issuing Authority of the said Driving License:	ROHIT PRADEEP SHARMA At BDCC BANK RAJGOPALCHARI WARD CIVIL LINE BHANDARA, BHANDARA MAHARASHTRA
The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:	NO
Name and address of the Owner of the vehicle as it stands on the date of the accident:	Pradeep Brindawan Sharma At.B/H BDCC BANK RAJGOPALCHARI WARD CIVIL LINE BHANDARA, BHANDARA MAHARASHTRA
Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Officer of the said insurance Company:	Universal Sompo General Insurance Company Limited
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	2367/76441493/S0/000 VALIDITY DATE 01/02/2026
Action taken,if any, and the result thereof:	Police Investigation

Inspector of Police