**Accident Report for the Month of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **S.No** | **HES Accident No.** | **Ambulance Call Sign No.** | **Reg. #** | **Vehicle Make** | **Station** | **Accident Date** | **Accident Time** | **Accident Location** | **Accident Details** | **Driver Name** | **Emp. Id #** |
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