

Cr.No:mmmmmmmm u/s 304 (A) IPC OF Mmmmmmmmmmm PS

Accident Report from Motor Vehicles inspector.Vijayawada

1. Name and address from whom the Requisition is received : Station House Officer, Mmmmmmmmmmm PS
2. Date of receipt of the above by the MotorVehicles Inspector : 19-09-2019
3. Date time and place of accident : On 19-09-2019 at about 16.24 hr on 19-9-2019.
4. Width of road and nature (bend turn curve Gradient etc., 0 and a brief description of the Locality of the accident : mmmmmmm
5. Vehicles involved in accident (With a brief description Of the type make and mode of vehicle or vehicles With their registration number) : mmmmmmm
6. Date time and place of inspection : on 19-09-2019 at about 16.25 hr inspected the vehicle at .
7. Date of expiry of the Present fitness certificate : mmmmmmm
8. Detail regarding damage sustained by the vehicle or vehicles due to accident : Mmmmmmm
9. Conditions of brakes at the time of inspection : Mmmmmmm.
10. Conditions of tyres : Mmmmmmm
11. Date of validity of permit : mmmmmmm
12. Date expiry of insurance. Name and address if the company which issued the poly number of policy and certificate. : .mmmmmm
13. Name of the owner : Mmmmmmm.
14. Name of the driver : .mmmmmm.
- a). D.L. particulars. : Mmmmmmmmm.
15. Whether the accident is due to mechanical defects of the vehicles if so the reasons and conclusions arrived at on inspection. : Mmmmmmm.

Copy submitted to D.T.C. / R.T.O.,