

FORM 54

[See Rule 150(a) & (2)]

ACCIDENT INFORMATION REPORT



1. Name of the Police Station. **PS Talai**
2. F.I.R. No. / Traffic Accident Report. **26/2014.**
3. Date, Time and Place of the Accident. **Dt 28/3/14 at 3 Pm at (Kharota.)
(Sangaswin)**
4. Name and full address of the injured/ deceased. **Deceased Ram Dass Sharma S/o Sh
UDHARAN R/O SANGASWIN PO
Berthin Tel Jhonduta Dist
Bilaspur Aged: 84 yrs**
**Injured: Kishorilal Sharma S/o.
UDUNGA DASSV PO BAKHYORA TEL
BARBAR DISTT HANIKHOLI HP)**
5. Age of the victims at the time of accident. **Deceased Ram Dass = 84 yrs
Injured Kishorilal = 60 yrs
Not produced by the victims**
6. Income of the victim
7. Name and ages of the dependent family member. **Photocopy of Ration card in the
deceased is attached herewith**
8. Name of the Hospital to which he/ she was removed. **CHC Berthin - RU Bilaspur
& PGI - Deceased -
& Injured shifted to P.H. Hospital
Bilaspur by their family.**
9. Registration number of vehicle and type of the vehicle. **HP-23C-2083 Car
SWIFT DZIRE VXI (BS IV)**
10. Driving License particulars.
 - (a) Name and address of driver. **Raseed Mohammad S/o Jugal Mohammad
Vill Malari PO Malangan Tel Jhonduta
Dist Bilaspur (HP)**
 - (b) Driving License Number and date of expiry. **HP.2320090221115
NTR- 05/06-29 K TR-29-05-14**
 - (c) Address of issuing Authority. **RLA Ghumarwin**
 - (d) Badge No. in case of public service vehicle.
11. Name and address of the owner of the vehicle at the time of the accident. **VIJAY KUMAR S/o Sumanbati
MUMALARI P.O MALANGAN
Tel Jhonduta Dist Bilaspur (HP)**

12. Name and address of the Insurance Company with
Whom the vehicle was insured and the
particulars of the Divisional Officer of the said
Insurance Company.

ICICI LOMBARD
GIC LTD.

13. Number of insurance policy/ insurance certificate
And the date of validity of the insurance policy/
Insurance certificate.

3001/MI - 01733218/00/000

Valid Till 19-12-2014

14. Registration particulars of vehicle (class of vehicles)

(a) Registration number

HP-23C-2083 CAR

Name and address of the Insurance Company with

(b) Engine Number

particulars of the Divisional Officer of the said

(c) Chassis number.

K12MN1329746

MA3EJKJIS00430953

15. Route permit particulars.

16. Action Taken if any and the result thereof,

insurance certificate.

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SHO Police Station

Cummal
SHO Talai
Police Station Talai
Distt. Bilaspur (H.P.)