

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : Arshad Raza
 (b) Age : 23
 (c) Address : मडोला जवारी कस्बा क-नो-५
 (d) Is the Driver
 1. Owner :
 2. paid driver? : Friend no Ardam
 3. Owner's relative or friend? : Friend
 (e) If paid driver, how long has he been in your employment :
 (f) Was he under the influence of intoxication Liquor or drugs? :
 (g) Driving Licence Number : UP 76 20230006500
 (h) Issuing Authority :
 (i) Date of Expiry : 31-12-2041
 (j) Was the licence temporary/permanent : Permanent
 (k) Details of endorsement/suspension, if any : no
 (l) Has he been involved in any accident before? : no
 (m) Has he been charged by the policy? If so, Why? :

4. OTHER INSURANCE

Details of other insurance Policies indemnifying you in respect of this accident

5. DETAILS OF ACCIDENT

- (a) Date and Time : 27/12/2025
 (b) Place : Purukha bed Road Ren Khuth maine side
 (c) Speed of vehicle at the time of accident : SS
 (d) Give a short description of the accident : accident by overtake
 (e) If any third party was responsible for this accident give the name and address : Purukha bed Road Gungund Ren How Hvi

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage :
 (b) Estimated cost of repairs : 3388/-
 (c) When and where can the damaged vehicle be inspected :

7. THIRD PARTY INJURY/PROPERTY DAMAGE

- (a) Name :
 (b) Address :
 (c) Full Details of personal injury sustained :
 (d) Name and address of any person/hospital giving medical attention to injured person : NA
 (e) Full details of property damaged :
 (f) Has notice of any claim been given to you? :