

P.S.:

FORM 54

FIR No.

{See rule 150(1) and (2)}

ACCIDENT INFORMATION REPORT

1.	Name of the Police Station	
2.	CR.No./Traffic Accident Report	
3.	Date Time and the Place of accident	
4.	Name and Full address of the Injured/Deceased	
5.	Name and Hospital to which he/she was removed	
6.	Registration No. of Vehicle and type of the Vehicle	
7.	<u>Driving License Particular</u> a) Name and Address of the driver b) Driving License No. and date of expiry c) Address of Issued Authority d) Bagde No. In Case of Public Service Vehicle	
8.	Name of Address of Owner of the vehicle at the time to the accident	
9.	Name of the Address of the Insurance Company With Whom the vehicle was Insured and particular of the Divisional officer of the said insurance company	
10.	Number of Insurance Policy/ Insurance Certificate and the date of validity of Insurance Policy/Insurance Certificate	
11.	<u>Registration particulars of the Vehicle:-</u> a) Registration No. b) Engine No. c) Chassis No.	
12.	Route Permit Particulars	
13.	Action taken, if any and the result.....thereof	