


**FORM COMP AA**

[SEE Rules २५३@]२५४(C)(III)२५४(८० २५५ (३)(IV)]

**REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS**

१	Name of the police station	--	Vijaydurg
२	Cr.no./tar no /sde no.	--	Cr no - ३६/२०१७ ०३/२०१७ sde - २०७/०४
३	Date time and place of the accident	--	२५/०७/२०१७ to २०.०० pm. Vijaydurg to tarele road pombhurle dewulwadi tal devgad.
४	Name of the injured/deceased	--	१.vittal mahadev vedruk age-५० २.vittal dhondu vedruk age-२० at baprde tal.devgad
५	Name of hospitsl to which he /she was removed.	--	Nevre hospital kankavali.
६	Number of vehicles and type of the vehicles	--	१.Alto ८०० mh -०७-ab-००२४.
७	Name and address of the driver of the vehicles with particulers or driving liecense of the said driver and the address of the issuing authority of the said driving license the number of badge in case of public service vehicles and address of the issuing authority of the said badge.	--	Suhas govnd gurav age-४० at patgoan guravwadi. Tal- devgad Licence.no.mh - mh ०७ २०१३०००९८५५. r.t.o. oros dist sindhudurg validity - १५/०१/२०२६ upto privet service badge
८	Name and address of the owner of the vehicles as it stands on the accident.	--	at patgoan guravwadi.Tal- devgad
९	Name of the address of the insurance company with whom the vehicles was insured and the divisional office of the said insurance company.	--	National insurance company - kankavli
१०	Number of insurance policy/insurance certificate and the date of validity of the insurance policy / insurance certificate.	--	No. २७०८०३३११६६१६५०००५३९ Valid - ०४/२०१७
११	Action taken if any and result thereof.	--	Police investigation
			
			A.R.CHAWAN
			Inspector of police
			Vijaydurg police station
	N.B..- this form should accompany with all the necessary document viz (१) f.i.r (२)panchnama(३)medical certificate/post-mortem report.		