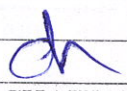


FORM COMP AA

[SEE Rules २५३@]२५४(C)(III)२५४(८० २५५ (१)(IV)]

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

१	Name of the police station	--	Vijaydurg
२	Cr.no./tar no /sde no.	--	Cr no - ४५/२०१७ ०४/२०१७ sde-२३६/१८
३	Date time and place of the accident	--	२४/०८/२०१७ to ११.३० to ११.३० am goval dhangarwadi tal devgad.
४	Name of the injured/deceased	--	Vaibhav govind kokre age-१३ goval dhangarwadi
५	Name of hospitals to which he /she was removed.	--	Nagvekar hospital kankavali.
६	Number of vehicles and type of the vehicles	--	Tata magic rikshaw no mh -०७-ab-०५८३.
७	Name and address of the driver of the vehicles with particulars or driving license 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.	--	Abhishek jaggannath ghadi age-२६ manche muragwadi. Licence.no.mh-०२ २०१३००५७९६५. r.t.o.andheri- validity - ०६/०८/२०१९ upto privet service badge
८	Name and address of the owner of the vehicles as it stands on the accident.	--	manche muragwadi. Tal devgad yes
९	Name of the address of the insurance company with whom the vehicles was insured and the divisional office of the said insurance company.	--	The oriental insurance company - kankavli
१०	Number of insurance policy/insurance certificate and the date of validity of the insurance policy / insurance certificate.	--	No.१६४५०१/३१/२०१७/६०१३ Valid - २१/२१०/२०१६ to २१/१०/२०१७
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.			