

**FORM COMP.A.A.****(See Rules 253(c), 234(5)(iii), 254(2) 255(1)(iv) )****REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS**

Sr.			
1.	Name of the Police Station	:-	GHOLWAD
2.	Cr/No.Tar/No. SEC No.	:-	I 39/2019 IPC U/s 279,337,Mv Act 184,187
3.	Date Time and place of the accidents	:-	01/06/2019 At 12-00 . Jabugav Grampnchat javal
4.	Name of the Injured/deceased	:-	Injured – Pratap Avinash Prmar At- Jambugav murhapada tal- Tal- Dahanu, Dist- Palghar
5.	Name of the Hospital to whiche he/she was removed	:-	Hospital – -
6.	Number of vehicle and types of the vehicle	:-	1) Motar cycalc k No-MH. 04-J-8276 2) Moter car No. MH 48 -AW-1312
7.	Name and address of the driver of the vehicle with particulars driving license of the said driver driver and the address of the issuing Authority of the said Driving License, the number of the Badge in case of Publice Service Vehicle and the address of the issuing Authority of the saidBadge?	:-	Naresh Vajya Andher Age- 25, At-, Jambugav murhapada Tal- Dahanu, Dist- Palghar(Accused) Driving License –MH48 20130000153 RTO- Vasi
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	:-	2] car owner- Suvarna P Patil At- 129 A, Prasad Bunglow,Behind S P School palghar
9.	Name and address of the Insurance company with whom the Vehicle was msured and the Divisional office of the said Insurancecompany?	:-	Maruti Insurance Broking Ltd
10.	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	:-	Insurance Policy No- 98000031180306658636 Date of the Validity – 26/06/2018 to 25/06/2019
11.	Action taken if any and the result there of.	:-	Charge Shit Submit on date-14/10/2019

**NB:-**This form Should accompany with all the necessary document viz (i) FIR, (2) Panchnama, (3) Medical Certificate/Postmortum Report.

**Date:- 14/10/2019**

**INSPECTOR OF POLICE  
GHOLWAD POLICE STATION**