

## 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		
2.	Cr/No.Tar/No. SEC No.	:-	Dahanu
3.	Date Time and place of the accidents	:-	I 177/19 IPC 279,337,338.MV Act 184,187
4.	Name of the Injured/deceased	:-	25/11/19 time-12.15 At -front of Bariwada, Masoli, Tal-Dahanu Dist-Palghar.
5.	Name of the Hospital to whiche he/she was removed	:-	1.Vijay jayantilal Vajani 2.Kishor Sukar mali
6.	Number of vehicle and types of the vehicle	:-	Westcoast Diagnostic Centre & Nursing Home dahanu dist. palghar
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 said Badge?	:-	Moter cycal MH-48,AA-4084 2. Moter cycal MH 48 BS 0373
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	:-	Arbaj Ekabal Shikha, Age-20Y, AT- Vadakun, Masholi, Dist-Palghar
9.	Name and address of the Insurance company with whom the Vehicle was msured and the Divisional office of the said Insurancecompany?	:-	Trevor L Dsouza AT- Dsouza house Masholi Main Rd, Dahanu
10.	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	:-	The ICICI Bank tower 2 nd flower Above ICICI bank Lombard Nibhaye Vaade Ahmedabad
11.	Action taken if any and the result there of.	:-	Policy no-3005/183233612/00/000
			Police investigation

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

**Date:-20/11/2019**

**INSPECTOR OF POLICE  
DAHANU POLICE STATION**