

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	:-	Dahanu
2.	Cr/No.Tar/No. SEC No.	:-	I 134/2020 IPC 304(a),279, 337,338.MV Act 184,187,134(A)(B)
3.	Date Time and place of the accidents	:-	04/07/2020 time-19.30 At - santhosi devipada, charodi rd, Tal-Dahanu Dist-Palghar.
4.	Name of the Injured/deceased	:-	Asgar Shonkat Ansari , Age 32,Add- Santhosi Devipada, dahanu , Tal- Dahanu, Thane 401602
5.	Name of the Hospital to whiche he/she was removed	:-	SDM Dahanu
6.	Number of vehicle and types of the vehicle	:-	Ricsa No MH-48-N3013 Moter ceycal No MH-4BJ-1143
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?	:-	Jayparkash Kisor Tiwari , Age- 45 Add- Asagad, Dhodipada, Tal- dahanu, Dist- Palghar 401602
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	:-	Rajendra Harishchandra Raut At- Mukam Post Narpad,, Tal- dahanu, Dist- Palghar 401602
9.	Name and address of the Insurance company with whom the Vehicle was msured and the Divisional office of the said Insurancecompany?	:-	Go Digit General Insurance Co. Ltd. Bangoluru
10.	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	:-	D018926951/06072020
11.	Action taken if any and the result there of.	:-	Nil

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

Date:-04/07/2020

**INSPECTOR OF POLICE
DAHANU POLICE STATION**