

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 198/2020 IPC 279, 337,338.MV Act 184
3.	Date Time and place of the accidents	:-	18/11/2020 time-12.30 At -Devjav, Basarpada , Tal-Dahanu Dist-Palghar.
4.	Name of the Injured/deceased	:-	Rahula Ramesh Dhagada, Ahe 20 Y, Sisane Pandartara, dahanu , Tal- Dahanu, Thane 401602
5.	Name of the Hospital to whiche he/she was removed	:-	Primary Health Centre, Ganjad Tal- dahanu, Dist- Palghar.
6.	Number of vehicle and types of the vehicle	:-	Car No MH47Q5417 Moter cycal No MH 03AC9949
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?	:-	Jatin Dhirubhai Desai Add- B-302 Riddhi Apt, Chikuwadi , Shimpoli, Nr Linking Road, Borivali (w) Mumbai -400092
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	:-	Jatin Dhirubhai Desai Add- B-302 Riddhi Apt, Chikuwadi , Shimpoli, Nr Linking Road, Borivali (w) Mumbai -400092
9.	Name and address of the Insurance company with whom the Vehicle was msured and the Divisional office of the said Insurancecompany?	:-	Future General india Insurance Co. Ltd. 4th Floor, Windfall Sahar Plaza Complex Andheri Kurla Road, J.B. Nagar, Andheri (east)
10.	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	:-	V9610324
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:-18/11/2020

**INSPECTOR OF POLICE
DAHANU POLICE STATION**