## 227 FORM COMP.A.A.

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

-	KELOKI VROOL LHE WO	OT	OR VEHICLE ACCIDENTS
Sr			
-	Name of the Police Station	:-	Gholwad
2	. Cr/No. Tar/No. SEC No.	:-	T 13/2021 IPC U/s 279,337, 338,mv Act 66/192
3	. Date Time and place of the accidents	:-	Date 28.03.2021 At 18.45 pm, Place, Vevaji Nanapada, Umbargaov to Vevaji Road
4.	Name of the Injured/deceased	;-	1.Savita Ramji Waghat, 2. Saguna Dival Bherade, Both At. Vevaji Singhalpada Tal.Talasari Dist. Palghar
5.	was removed	:-	Mamta ,Hospital Umbargoan, Gujrat
6.	vehicle	:-	<ol> <li>Motar Car - MH.48/C 0382</li> <li>Auto Rixa - GJ 48YY 7019</li> </ol>
7.	vehicle with particulars driving license of the said 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?	:-	1) Ramu Laxman Ghatal Age 45, Police Hedcostebal 1680 Palghr, Sub Police Office Driving License No. MH12 20140067180 DOI 01.11.2014 RTO Pune 2) Luvesh Tulaji Ambat age 27 . Vevaji Singhalpada Tal.Talasari Dist. Palghar Driving License No. MH4820150035140 DOI 28.10.2015 RTO Vasai
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	:-	<ol> <li>Palghar SP Office</li> <li>Luvesh Tulaji Ambat age 27 . Vevaji Singhalpada Tal.Talasari Dist. Palghar</li> </ol>
	Name and address of the Insurance company with whom the Vehicle was msured and the Divisional office of the said Insurancecompany?	:-	1) 2) IFFCO- TOKIO General Insurance Co. LTD
	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	:-	1) 2) 1) Policy No. 91359396 Validity Date 26.02.2015 to 25.02.2016
1	Action teken if any and the result there of	:-	Nili
	TILL A	<u> </u>	- ,

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

Date:-