

227 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 119/2021 IPC U/s 304(A) 279,337,338, MV - ACT 66/192
3.	Date Time and place of the accidents	: Date 02/03/2021 At 16.30 , Place saravli Savta - Road near Government Toilet, Tal Dahanu Dist Palghar
4.	Name of the Injured/deceased	: 1)Barkya Govind Gavali Age-65 At/Post- - kotbi,Ashagad, Tal-Dahanu Dist- palghar
5.	Name of the Hospital to whiche he/she was removed	: Seva Narsing Home Dahanu,Sub District - Hospital Dahanu, Tal Dahanu Dist Palghar,Civil Hospital Valsad, New Civil Hospital Surat Gujrat
6.	Number of vehicle and types of the vehicle	: 1. Tempo No. MH48-T-4620 -
7.	Name and address of the driver of the 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 saidBadge?	: 2) Accused- Rakesh Surji Dandekar, Age 31 - R/O Chari Patilpada, Tal-Dahanu Dist Palghar Driving License No.- MH 04 20110004376 Date of validity – 07/03/2031 upto
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	: 1) Tempo No. MH48-T-4620 - Name- Rakesh Surji Dandekar, Age 31, R/O Chari Patilpada, Tal-Dahanu Dist Palghar
9.	Name and address of the Insurance company with whom the Vehicle was msured and the Divisional office of the said Insurance company?	: -
10.	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	: -
11.	Action taken if any and the result there of	: Nill

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

Date:-

INSPECTOR OF POLICE
DAHANU POLICE STATION

