

FORME COMP.AA
(See rules 253(c),234(5)(iii),254(2),255(1)(iv))
REPORT ABOUT THE VEHICLE ACCIDENT -1

REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS		
SR.NO		
1.	NAME OF THE POLICE STATION	JAWHAR POLICE STATION DIST- PALGHAR
2.	CR NUMBER AND SECTION	
3.	DATE, TIME AND PLACE OF THE ACCIDENTS	
4.	NAME OF THE INJURED/ DECEASED	I 11/2021 IPC- 304 (A)279,337,338,427 MAVACT-181
5.	NAME OF THE HOSPITAL	DATE-10/01/2021, AT 16.00 PM TO 18.30 P.M TALAVLI GAION TAL JAWHAR DIST- PALGHAR
6.	NUMBER OF VEHICLE AND TYPE VEHICEL	MH-12 KF 7404 BAJAJ COMPANY MOTOR SICKEL SCOOTER CHASSIS NO MD2A52CZ4DWE17939 ENGINE NO JEZWE72814
7.	NAME AND ADD OF DRIVER OF PARTICULARS OF DRIVER LICENSE OF THE DRIVER AND THE ISSUE, AUTHORITY OF SAID DRIVING LICENSE OF NUMBER OF THE BANDGE IN CASE OF PUBILCE SERVICE VEHICLE AND THE ADDRESS OF THE USING AUTHO RITY OF THE SAID BANDGE	1) MAHENDRA BHAU MAHALE AGE -34 YEAR AT. KARDHAN POST DENGACHI MET YAL JAWHAR DIST PALGHAR RTO VASAI
8.	LICENSE OF NUMBER	NIGETIVE
9.	NAME OF THE ADDRESS OF OWENER OF THE VEHICLE AS IT STAND ON THE DATE OF ACCIDENTS	1) MAHENDRA BHAU MAHALE AGE -34 YEAR AT. KARDHAN POST DENGACHI MET YAL JAWHAR DIST PALGHAR.
10.	NAME OF THE ADDRESS INSURANCE COMPANY WITH WHOM THE VEHICLE WAS INSUED AND THE DIVISTIONAL OFFICE OF THE SAID INSURANCE COMPANY	BAJAJ ALLIANZ GENERAL INSURANCE COMPANY VASAI LTD MRS-KAVITA MAHESHAVARIC/102SAMRUDHI PRIDERAIKAR MALA DHAYARIPUNE 411041
11.	NUMBER INSURANCE POLICY AND THE DATE OF VLIDYTY OF UNSURANCE POLICY	OG -14-2001-1802-00024285 31/08/2013
12.	ACTION TAKEN,IF ANY AND THE THIRE IF	AABET SAMRI DATE 26/02/2021