

## 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	:- Talasari Police Station
2.	Cr/No. Tar/No. SEC No.	:- 141/2021 IPC-304(A), 279, 337, 338, 427 M.V. Act 184 etc
3.	Date Time and place of the accidents	:- 07/07/2021 at Time 16.00 PM Gurgao aarajpada road Traning point, Tel- Talasari, Dist Palghat
4.	Name of the Injured/deceased	:- <b>Deceased-</b> 1. Patit chaitanya Dehari Age-31 year At- Gangadevi chal, solsumbha Ta.-Umargao Dist- Valsad, Gujarat state 2. Vishvajet Ashok Jena Age- 32 Year At- Gangadevi chal, solsumbha Ta.-Umargao Dist- Valsad, Gujarat state
5.	Name of the Hospital to whiche he/she was removed	:- Rural Hospital Talsari
6.	Number of vehicle and types of the vehicle	:- GJ.15.AJ.2851 Motar cycle
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 saidBadge?	:- Patit chaitanya Dehari Age-31 year At- Gangadevi chal, solsumbha Ta.-Umargao Dist-Valsad, Gujarat state  <b>Driving license-</b> no
8.	Name and address of the Owner of the Vehicle as it stand on the date of the accident?	:- Deepak kumar At- Atakparadi Dharampur road Valsad Gujarat
9.	Name and address of the Insurance company with whom the Vehicle was insured and the Divisional office of the said Insurancecompany?	:- -
10.	No. Of Insuranc Policy/Insurance Certificate and the date of the validity of the Insuranc Policy/Insurance Certificate.	:- <b>Insuranc Police No:- -</b>  <b>Validity:- -</b>
11.	Action taken if any and the result there of.	:- Police pending

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

**Date:- 21.07.2021**

**INSPECTOR OF POLICE  
TALASARI POLICE STATION**