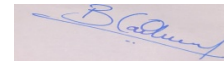


FORM COMP .AA

(See rules 253 (c) , 234 (5) iii, 254 (2), 255(1) (iv)

REPORT ABOUT THE VEHICALE ACCIDENT

45.	Name of police station	Kelva sagari police thane
46.	Cr/no to/no.sec.no	1/2023 ipc 279, 337, 338, m.v.act 184, 146/196
47.	Date, Time and place of the accident.	14/12/2023at 05.00 to 05.30 makunsar to safala road brhamdev mandir road tal.dist.palghar
48.	Name of the Injured/Deceased	Krushnkumar vaman patil age 62 year At. Makunsaar bhandaraali tal dist.palghar mobile no. 9766825808
49.	Name of Hospital to which he/she was removed	Sai hospital safale
50.	Number of vehicles and types of vehicles.	Hondaunicorn Motar CYCAL no. MH-48 v 9166
51.	Name and address of the driver of the vehicles with particulars or Driving license of the said Driver and the address of the Issuing Authority of the said Driving License. The number of Badge in case of Public Service Vehicle and the address of the Issuing Authority of the said Badge	Rupesh madhukar kini age 32 year At.bharnepada tal. dist.palghar Driving License NO- MH4820150005699
52.	Name and address of the Owner of the vehicles as it stands on the date of the accident.	Rupesh madhukar kini age 32 year At.bharnepada tal. dist.palghar
53.	Name and address of the Insurance Company with whom the vehicles was insured and the Divisional Office of the said Insurance Comoanv	NIL
54.	Number of Insurance Policy/Insurance certificate and the date of validity of the insurance policy/Insurance Certifi cate	NIL
55.	Action taken, If any, and the result there of.	Court pending



ASS.POLICE INSPECTOR
KELVA COSTAL POLICE STATION