आवक क्र. 754/21
दिनांक 15/11/21

FORM COMP AA

[See Rules 253 ©, 254 (c) (iii) , 254 (80 255 (1) (iv)]

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1.	Name of the Police Station	:-	Wadgao Jungal
2.	CR. NO./TAR No./ SDE No.	:-	216/21 Sec. 279, 338, 304(A) IPC
3.	Date, Time and place of the accident.	:-	04/10/21 at 19/30
4.	Name of the Injured /Deceased	:-	1) Vishal Annatrao Watile year 30 2) Yogesh Annatrao Watile year 35 at Khapri
5.	Name of Hospital to which he /she was removed.	:-	V.N.G. Hospital Yavatmal
6.	Number of vehicles and type of the vehicle.	:-	Palsar MH 34 BS 2377 Shain MH 29 BJ 0420
7.	Name and address of the Driver of the vehicle 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.	:-	Victim- Yogesh Anantrao Watile at Khapari Ta Ghatanji Dist Yavatmal Lic No.- MH29 20110012611 Accue. Sandip Gajanantrao Pawar, at Khapri Ta Ghatanji Dist Yavatmal Lic No MH29 20120019496
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	Sunil Ajabrao Mandlikar at Khapri Ta Ghatanji Dist Yavatmal Palsar MH 34 BS 2377
9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	Chola Insurance Company LTD.
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	3107200400082/000/00 Date 02/09/2019 to 01/09/2024
11.	Action taken, if any, and the result thereof.	:-	FIR Spot Panchnama FIR Statement RTO Riport
	N.B.– This form should accompany with all the necessary document.viz. (1) F.I.R (2) Panchanama (3) Medical Certificate/Post –Mortem Report.		

पो. हे. कॉ. ११०
पो स्टे ...