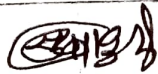


# FORM COMP. 'AA'

(See rule 253 (c), 254 (5) (iii), 255(1)(iv))

## Report About The Motor Vehicles Accidents

1	Name of the Police Station	पोस्टे नेर जि. यवतमाळ
2	Crime No./ TAR No. / SDE No.	422/2022 sec. 279, 337, 338 भादवि
3	Date time and place of the accident	दि. 30/08/2022 चे 16/00 वा. चे सुमारास खोलापुरी ते उमरठा रोड ता.नेर
4	Name of the injured/ deceased	आदित्य राजेद्र बारबुदे वय 19 वर्ष रा.खोलापुरी ता.नेर
5	Name of the Hospital to which he/she was removed	ग्रा .रु. नेर /विनायका हॉस्पिटल यवतमाळ
6	Number of vehicle and the type of the	1)मारुती कॅरी क्र. एम एच 29 बी.ई.3206 2) स्प्लेंडर क्र.एम.एच 29 बी.एच.1949
7	Name & address of the Driver of the vehicle with particulars of driving licence of the said driver and the address of the issuing authorite of the said driving licence	धिरज परशराम राठोड वय 23 वर्ष रा.खोलापुरी DL NO.MH29 20210014436 MH. STATE MOTOR DR.LICENCE
8	Name & address of the owner of the vehicle as it stands on the date of the accident	महादेव भरत नन्नावरे वय 45 वर्ष रा.उमरठा ता.नेर
9	Name & address of the insurance company with whom the vehicle was insured and the divisional office of the said insurance	चोलामंडलम जनरल इन्शुरन्स कंपनी ली.नागपुर ब्रॅन्च टिलक नगर,गुंट फ्लोर नं.22
10	Numbar of insurance policy/insurance certificate and the date of validity the police/ certificate of insurance.	पाॅलीसी नं.3379/03152729/000/00--- 08/04/2022 /07/04/2023
11	Action taken,if any and the result the reof	तपास सुरु.



सुभाष या. ठाकर

Date :- 15/02/2022 Signature- ब.नं. 340

(Inspector of police/P.S.O.) पो. स्टे. नेर, जि.यवतमाळ

Police Station Ner