

GN No 1521/2019

FORM COMP AA

Date: 21-07-2019

[See Rules 253(c), 254(o)(iii), 254(8), 255(1)(iv)]

REPORT ABOUT THE MOTOR VEHICLES ACCIDENT

1.	Name of the Police Station	:-	Pandharkwada Dist. Yavatmal
2.	CR. NO./TAR No./SDE No.	:-	260/19 MY 279.337,304 A 5 P 2
3.	Date, Time and place of the accident	:-	3.4.2019 at 20.00 PM. Place: Saykhele. Area - S.H. No. 6.
4.	Name of the injured/Deceased	:-	D. V. S. M. Motiram like age 56 yrs to Mar. (Juba) Taj. Redgaon Dist. Yavatmal
5.	Name of Hospital to which he/she removed	:-	SDH. Pandharkwada. Taj. Keshu Dist. Yavatmal
6.	Number of vehicles and type of the vehicle	:-	Taxi No. MH40 AK-0824
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 issuing Authority of the said Badge	:-	Rambhau - Domaji Koyachande. age 42 75 S P to Khadi (Guranda) & Koyachande. F. H. B. Taj. Mar. Redgaon. Dist. Yavatmal DL No. AV129-20100011053
8.	Name and Address of the Owner of the vehicle as it stands on the date of the accident	:-	Deepak Govindprasad Jaiswal At Lodhi Sonagaon. Batibari. Nagpur. Maharashtra.
9.	Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company	:-	Unit. 2200. 23 Dist. Nagpur Unit. 2200. 23 Dist. Nagpur Nagpur Branch office. 3rd floor. Tukhary Road Dharampeth Nagpur. M.S. code 27 Pin 440010
10.	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy/Insurance	:-	US41/PSWEB/0171103/00/000 Date of validity 17/11/2019 till
11.	Action taken, if any and the result thereof	:-	Report Panchnama. Inquest Panchnama. done and Arrest. Acc. case. Person. statement of witness. Recorded & P. R. d. ch. sheet against accused.
			Inspector of Police नीलेश मोरिया नीलेश मोरिया नीलेश मोरिया
N.B- This form should accompany with all the necessary document vis. (1) FIR (2) Panchnama (3) Medical Certificate/Post Mortem Report			