FORM COMP AA

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

REPORT ABOUT THE MOTOR VEHICLES ACCIDENT

1	Name of the Police Station	:-	Babhulgaon Dist-Yavatmal
2	CR. NO./TAR No./SDE No.	:-	284/21 Sec-279, 304(A) IPC.
3	Date, Time and place of the accident	:-	5/7/2021 Babhulgaon to Yavatmal Road 12/30 P.M.
4	Name of the injured/Deceased	:-	Rajnish Deshraj Yadav Age 33 Yrs R/o Vidarbh Housing Society Yavatmal.
5	Name of Hospital to which he/she removed	:-	No (On the Spot Death)
6	Number of vehicles and type of the vehicle	:-	One Truck No MH/29/M/0266
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	:-	Pramod Namdeo Chauhan Age 30 R/o Pimpri Tq. Pusad
8.	Name and Address of the Owner of the vehicle as it stands on the date of the accident	:-	Nashim Amin Kazani R/o Yavatmal
9.	Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company	:-	New India Insurance Company, Yavatmal
10.	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy/Insurance	:-	16/3/2021 to 15/3/2022
11.	Action taken, if any and the result thereof	:-	For Investigation
			Inspector of Police Babhulgaon Police Station
			पोलीस निरीक्षक पोस्टे बाभुळगाव
	N.B- This form should accompany with all the necessary document vis.(1) FIR (2) Panchnama (3) Medical Certificate/Post Mortem Report		