


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 :- Ner
2. Crime No./ TAR No. / SDE No. :- 705/18 sec. 279,338,304 (A)
3. Date time and place of the accident :- 25/12/18 17:30 to 19:30 Loni
4. Name of the injured deceased :- (Head injured) 1)Avinash Vijay Chauhan 24 yers 2) Sushila Vijay Chauhan 45 yers Pimpi Ijara, Ner
5. Name of the Hospital to which he/she was removed :- R.H.Ner
6. Number of vehicle and the type of the :- Tankar No. MH-04-GF-4947
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 :- Santosh Mahadev Ingale. At P Gaygon TQ. Akola DL NO.MH3020130001702 MH. STATE MOTOR DR.LICENCE
8. Name & address of the owner of the vehicle as it stands on the date of the accident :- VAJID KHAN SAMSHER KHAN AKOLA
9. Name & address of the insurance company with whom the vehicle was insured and the divisional office of the said insurance company. :- THE NEW INDIA INSURANCE CO.LTD AKOLA
10. Numbar of insurance policy/insurance certificate and the date of validity the police/ certificate of insurance. :- 16100031170100006921 ON 26/Oct/2018 TO 05/02/2019
- 11.Action taken,if any and the result the reof :- Accuse Arrested

Date :- 31/12/2018

Signature- 
(Inspector of police/P.S.O.)
Police Station Ner