



FORM COMO AA

{ see rules 253(c) 254(c) (iii) 254(80 255(1)(iv))

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1	Name of the police station	Maregaon dist yavatmal
2	CR NO/TAR/SDE no	157/21 sec 279, 337,338 IPC R/W 134 M.V.Act.
3	Date, time and place of the accident	Date 10/06/21 at 09/00 Near Sakhara village on road from Kumbha to gondburanda
4	name of the injured	Injured- Samir vasudeo kakade age 28 Year Add. gondburanda tq.Maregaon.dist .ytl
5	Namae of the hospital to which he/she was removed	Rular Hospital Maregaon dist yavatmal/govt Hospital chandrapur
6	Name of the vehicals and type of the vehicals	Tata Sumo Gold MH 26 AF 2428 Moter cycle MH 29 G 3274
7	Name and address of the driver of the vehicals with paricular on driving license of the said driver and the address of the issuing authourty of the said driving license the number of badge in case of public service and the address of the issuing of the said badge	Rajendra devendra Lande age 23 year at dahegaon, tq.Ralegaon dist Yavatmal
8	Name and address of the owner of the vehicles as it stand on the on the date of the accidents	Dattatray punjaram Pinge Age 46 Year At.dahegaon,post.Devadari,Tq.RalegaonDist.Yavatmal
9	Name and address of the insure company with whoim the vehicle was insured and the divisional office of the saiod insurance company	The New India Insurance Company Limited
10	Number of insurance policy/ insurance certificate and the date of validaty of the insurance certificate	17020731210200000045 Date 10/06/2022
11	Action taken if any and the result thereof	Police station Maregaon dist yavatmal maharastra cr no 157/21 sec 279,337,338 IPC Rw 134 Mv Act I/o NPC 892 Raju Tekam mo no- 9552537892

NB This form should accompaqny with all the necessary documents viz (1) FIR (2) Pnchanama (3) Medical certificate/post mortarm Report

जु. गोविंद टेकम
ना.पो.क्रॉ. 892
पो.स्टे.मारेगाव