

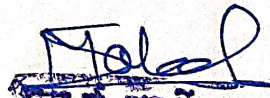
## FORM COMP AA

{{see rules 253(1),254(3),254(80),255(1)(5)}

### REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS

1	Name of police station	Vasantnagar,Yavatmal
2	Cr no	Cr no.07/2022
3	Date,time and place of accident	दि.१४/१२/२०२१ रोजी १८/०० ते १९/०० वाजता दरम्यान
4	Name of the injured deceased	संजयकुमार पंजाबराव हनवते
5	Name of the hospital to which he/she was removed	ग्लोबल हॉस्पिटल, नांदेड
6	Name and type of the vehicles	मोटरसायकल रॉयल एनफील्ड क्रमांक एमएच २९ बीआर.९०५०
7	Name and address of the driver of the vehicles with particulars or driving licence of the said driver and address of issuing authority of the said driving licence.The number of badge in case of public service vehicles and address of issuing authority of the badge.	मोटरसायकल रॉयल एनफील्ड क्रमांक एमएच २९ बीआर.९०५० चालक नामे संजयकुमार पंजाबराव हनवते,वय ५० वर्षे,रा. पुसद(मृतक स्वतः) चालक परवाना नाही
8	Name and address of the owner of of the vehicles as it stand on the date of the accident	संजयकुमार पंजाबराव हनवते,वय ५० वर्षे,रा. पुसद(मृतक स्वतः)
9	Name and address of the insurance company with whom the vehicle was insured and the divisional office of the said insurance company	आयसीआयसीआय लॉबार्ड, ४१४,आयसीआयसीआय लॉबार्ड हाउस,वीर सावरकर मार्ग,सिध्दीविनायक मंदीरजवळ,प्रभादेवी मुंबई-४०००२५
10	No. of insurance policy/insurance certificate and the date of validity of the insurance policy/insurance certificate	पॉलीसी क्र. ३००५/२३२७९२४९१/००/बी-०० मुदत-दि.२२/११/२०२२
11	Action taken,if any and the result their of	

Enclosure -1)FIR 2)Panchnama 3)Medical certificate/PM report

  
एस.ई. मातोंडकर  
सहा.पो. निरी.  
पो.स्टे. वसंतनगर (पुसद)