

FORM COMP AA

[see rules 253.254(c)(iii).254(80 255(i) (iv)]

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1	Name of the police station	Police Station wadkiDistYavatmal
2	CR.NO/TAR No./SDE No.	20/2021 u.section 279,337,304(A) I.P.C
3	Date.time and place of the accident	16/01/2021 Between 16:00 ralegaon T point wadki
4	Name of the Injured/Deceased	Sankarbalajianbulkar age 42 year At. Fukatatq. Hinganghat dist. wardha
5	Name of Hospital to witch he/she was removed	Gov. hospital nagapur
6	Number of vehicles and type of the vehicle	Motarsaycal m/g 32-e-9424
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 the Issuing Authority of the said Badge	Driver name- Raju pandurangpawarAge- 40- years avar .At- fukathatq. hinganghat
8	Name and address of the Qwner of the vehicle as it stands on the date of the accident	ShaligramvohtobajiVagh Age 75 years At. Madhacolanyvard no 6 wradha

9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	Nil
10	Number of Insurance Policy Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	Nil
11	Action taken if any and the result thereof	Police Station Wadki Cr.no 20/2021 u.section 279,337,304(A) I.P.C Investigation officer- NPC.Ghanshammesare B.No. 2004 mo.no.7875749977