



**FORM COMP. AA**  
**(See Rules 253©(iii), 254(1), (iv))**  
**REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS**

1	Name of The Police Station		Shirpur Dist Yevatmal
2	CR. NO-/ TAR.NO/SDE NO	÷	114/2020 .act. 279 ,304(A) i.p.c
3	Date.Time and place of the accident	÷	21/02/2020 am.18/30 place, 21/2/2020 Shirpur Dist Yevatmal
4	Name of the deceased	÷	Sandip Nandkishoar Bodhale 27 year At Post Borgov
5	Name of Hospital to which he/she removed	÷	R.H.Wani Dist.yevatmal
6	No.of.vehicles & type of the vehicle	÷	MH-29 AS-3794
7	Name and address of the driver of the vehicle with particulars or driving license of the said driver and address of the issuing authority of the said driving license the number of badge in caue of public service vehicle and address of the issuing authority of the badge	÷	Sandip Nandkishoar Bodhale 27 year At Post Borgov Ta Wani Dist Yevatmal  driving license ON
8	Name and address of the owner of the vehicle as it stands on the date of the accident	÷	Sandip Nandkishoar Bodhale 27 year At Post Borgov Ta Wani Dist Yevatmal
9	Name and address of the insurance company with whom the vehicle was insured and divisional office of the said insurance company	÷	
10	Namber of the insurance policy / insurance certificate and the date of validity of the insurance policy/ insurance certificate	÷	NO
11	Action taken.if any and Result there of	÷	Police pending

रुद्राजी नांदकर  
मार्च २१ २०२०  
पो.स्टे शिरपुर