

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	Parwa dist yavatmal
2	CR NO/TAR/SDE no	234/2022 sec 337,338,304A IPC.
3	Date, time and place of the accident	Date 01/03/2022 on 10/30 at chikhalwardha to kurli Road ps parwa
4	name of the injured	Death jayprakash vitthal mujmule age 43 year at-sawali sadoba Tq Aarni Dist. Yavatmal
5	Namae of the hospital to which he/she was removed	Criticare hospital yavatmal/gov hospital yavatmal Dist yavatmal
6	Name of the vehicals and type of the vehicals	Honda motorcycle No. MH/29/BR/5057
7	Name and address of the driver of the vechicles with pariculer 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 publice service and the address of the issuing of the said badge	jayprakash vitthal mujmule age 43 year at-sawali sadoba Tq Aarni Dist. Yavatmal
8	Name and address of the owner of the vehicles as it stand on the on the date of the accidents	Nanda jayprakash mujmule age 37 year at-sawali sadoba Tq Aarni Dist. Yavatmal
9	Name and address of the insure company with whoim the vehicle was insured and the divisional office of the saiod insurance company	NA
10	Number of insurance policy/ insurance certificate and the date of validaty of the insurance certificate	NA
11	t is and the recult	Police station Parwa dist yavatmal maharastra cr no 234/2022 SEC 337,338,304A IPC. I/o Npc/2079 Avinash mundhe P.S. Parwa

NB This form should accompagny with all the necessary documents viz (1) FIR (2)

Pnchanama (3) Medical certificate/post mortarm Report

अधिकाश मुंढे ना.पो.का./२०७९ पो स्टे. पारवा