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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	CR NO. 301/19 U/S 279, 337 IPC
3	Date, time and place of the accident	DT - 04/12/19 Time - 10/45 AM Nagar Panchayat Poot Road Maregaon
4	name of the injured	Mr. Siva Sanjay Choudhary age 4 yrs at - Maregaon
5	Name of the hospital to which he/she was removed	Rural Hospital Maregaon Dist - Yavatmal
6	Name of the vehicals and type of the vehicals	Honda Unicorn Byke No. MH/32/R 8048
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 publice service and the address of the issuing of the said badge	Driver - Giridhar Mohan Dakhore age 21 yrs at - Pisingaon Tal - Maregaon No Driving Licence
8	Name and address of the owner of the vehicles as it stand on the on the date of the accidents	Vithal Surybhan Bote at - Maregaon Pradip Sahebrao Mahajan At - Waradha
9	Name and address of the insure company with whom the vehicle was insured and the divisional office of the said insurance company	IFFCO TOKIO General Insurance Company LTD. Sadar Nagpur
10	Number of insurance policy/ insurance certificate and the date of validity of the insurance certificate	No. 40948890 Dt. of validity = 03/03/2010 to 02/03/2011
11	Action taken if any and the result thereof	After Investigation chargesheet put up JMFCourt Maregaon Dist Yavatmal

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

Pnchanama (3) Medical certificate/post mortarm Report

सविनय सादर.

पोलीस निरीक्षक
पो.स्टे.मारेगाव जि.यवतमाळ

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