FORM COMP AA [See Rules 253(c), 254(e)(iii), 254(8), 255(1)(iv)] REPORT ABOUT THE MOTOR VEHICLES ACCIDENT

•]	Name of the Police Station	:-	NALA DIV
	CR. NO./TAR No./SDE No.		WADKI
7		·-	. 11 2020 05 279,827
3.	Date, Time and place of the accident	:-	The state of the s
		٠.	2511/2020-1 14.489
4.	Name of the injured/Deceased	-	
			weimpelly maddy;
5.	Name of IV	, è.	*
٠.	Name of Hospital to which he/she removed	:-	1000 12 1 0 4
			LODA highneyals.
6.	Number of vehicles and type of the vehicle	-	the party of the same of the s
			APO2 TD 3938
7.	Name and address of the Driver of the		0014 001 05001
	vehicle with particulars or Driving License	13.	B.RAJGOPAL REDDY
	of the said Driver and the address of the		NO 29 VENKATSWAR A REDD
	Issuing Authority of the said Driving		이번 사람들은 그리아 이번 사람들은 아니라 아니라 아이들이 나는 아이들이 되었다. 그런 얼마나 아이들이 걸어 먹었다.
	License. The number of Badge in case of		BULD, 2ND CROSS, THUMM
	Public Service Vehicle and the address of		READY LAYOUT, DC HALLI
	issuing Authority of the said Badge		17 ANGLORE 560076
8.	Name and Address of the Owner of the	1:-	B: RAJGOPAL REDDY .VENKATA
	vehicle as it stands on the date of the		QCPDY D. 25/04/2020
9.	accident		
۶.	Name and Address of the Insurance	;-	tChold MS CEXERAL INSURPRI
	Company with whom the vehicle was		
ľ	insured and the Divisional Office of the said Insurance Company	1	· · · · · · · · · · · · · · · · · · ·
10.	Number of Insurance Policy/Insurance	75.	2
	Certificate and the Date of Validity of the		5/12/2019 # 4/12/2019
	Insurance Policy/Insurance		[2011] : [12] [12] [12] [12] [12] [12] [12] [12]
11.	Action taken, if any and the result thereof	† <u>:</u>	
	<u> </u>	1.	
		1	
'	1		
	^*;		
	., 1		
		1	Inspector Of Police
	'		Police Station
·			क्रम्हेला केसा जिस्करम

ि ठाणदार पोलीस स्टेझन, इंडकी फिल्हा यवतमाळ