

04,34

FORM COMP 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	:-	Ambajogai City Police Station Dist Beed
2.	CR.NO./TAR No./SDE No.	:-	गुरनं 360/2021 कलम 279,337,427 भादवि
3.	Date, Time and place of the accident	:-	दि. 27/08/21 रोजीचे 11.15 ते 11.30 वा.चे दरम्यान महावितरण कंपनीच्या गेटसमोर, अंबाजोगाई, रमाई चौक ते यशवंतराव चव्हाण चौक, अंबाजोगाई जाणारे रोडलगत
4.	Name of the Injured/Deceased	:-	जखमी:- श्रीपाद दिनकरराव जोशी वय 48 वर्षे रा. केशव नगर, अंबाजोगाई
5.	Name of the Hospital to which he/she was removed.	:-	सरकारी दवाखाना, अंबाजोगाई
6.	Number of Vehicles and type of the vehicle.	:-	मोटरसायकल पार्सींग नंबर MH-44-E-9202
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.	:-	रघुनाथ आश्रुबा सलगर वय 47 वर्षे रा. वाघाळा ता. परळी वै जि. बीड No Driving Licence
8.	Name and address of the owner of the Vehicle as it stands on the date of the accident.	:-	रघुनाथ आश्रुबा सलगर वय 47 वर्षे रा. वाघाळा ता. परळी वै जि. बीड
9.	Name and address of the Insurance Company with whom the vehicle was Insured and the Divisional Office of the Said Insurance Company.	:-	No Insurance
10.	Number of Insurance Policy/Insurance Certificate and the Date of Validity of The insurance policy/insurance certificate.	:-	No insurance produced
11.	Action taken, if any, and the result thereof.	:-	सदर प्रकरणात वरील प्रमाणे गुन्हा दाखल असून सदर गुन्हाचा तपास सुरु आहे.
N.B.-This form should accompany with all the necessary document viz (1) F.I.R. (2) Panchnama (3) Medical Certificate/Post-Mortem Report.			

पोलीस निरीक्षक
पो.स्टे अंबाजोगाई(शहर)

श्रीपा

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