



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	police station Patoda tq. patoda Dist Beed
2	Cr no./tar no/sde no	Cr.no.42/2024 U/s 279,337,304 (अ), 338 भादवी
3	Date time and place of the accident	16/02/2024 time 19.30 pm patoda to chumbali phata road, in front of hotel dadashree
4	Name of the injured/deceased	1) Piraji bansi dongar age 24 year at post nalwandi tq patoda dist beed
5	Name of the hospital to which he/she was removed	1) Civil hospital patoda 2) Sasun hospital patoda
6	Number of vehicles and type of the vehicle	1) MH-20 V-2502 Motar cycle 2) MH-22 AM-1260
7	Name and address of the driver of the vehicle with particulars of 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.	1) MH-20 V-2502 Motar cycle Piraji bansi dongar age 24 year at post nalwandi tq patoda dist beed 2) MH-22 AM-1260 Yogesh sugriv yeole at post dongerkiny tq patoda dist beed LICENSE NO – MH2320150006580
8	Name of the address of the owner of the vehicle as it stands on the date of the accident.	1) MH-20 V-2502 Motar cycle Piraji bansi dongar age 24 year at post nalwandi tq patoda dist beed 3) MH-22 AM-1260 hanumant babasaheb yeole at post dongerkiny tq patoda dist beed
9	Name and address of the insurance company with whom the vehicle was insured and divisional officer of the said insurance company.	--
10	Number of insurance policy /insurance certificate and the date of validity of the insurance policy/ insurance certificate.	--
11	Action taken if any and the result thereof.	Crime result pendding
		Police Inspector of P.s patoda
	N.B-this form should accompany with all the necessary document viz (1)fir (2)panchnama (3)medical certificate/p m report.	1)fir (2) panchnama