

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.166/2023 U/s 279,304 (अ), भादवी सह कलम 134,177 भादवी
3	Date time and place of the accident	01/08/2023 time-14.45 pm kuslamb substation road kuslamb tq patoda
4	Name of the injured/deceased	1) Krishna anna sondge age 21 year at post parner tq patoda dist beed (DEAD)
5	Name of the hospital to which he/she was removed	1) Civil hospital patoda
6	Number of vehicles and type of the vehicle	1) MH-45 V-5319 2) MH-01 DK-9012
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.	Krishna anna sondge age 21 year at post parner tq patoda dist beed (DEAD) 1) Mujahid karim sheikh age 42 year at post himayat nagar tal ashti dist beed LICEN NO. - MH23 20160002567
8	Name of the address of the owner of the vehicle as it stands on the date of the accident.	Stela alexander nadir at post koliwada Mumbai
9	Name and address of the insurance company with whom the vehicle was insured and divisional officer of the said insurance company.	Royal sundaram general insurance company ltd
10	Number of insurance policy /insurance certificate and the date of validity of the insurance policy/ insurance certificate.	VPT0504729000100 07/12/2022 TO 06/12/2023
11	Action taken if any and the result thereof.	Crime result pending 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