FROM COMP AA (See Rules 253©, 254(c) (iii), 254(80), 255(1)(iv)) REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

			g
1	Name of the Police Station	:-	बार्शी शहर पोलीस ठाणे
2	CR.NO/ TAR No./SDE No.	:	गुर नं १६/२०२३ भा द वि क २७९,३३८ व
			एम व्ही ॲक्ट कलम १८४
3	Date, Time and place of the accident	:-	दि.०९/०१/२०२३ रोजी १६.३० वा चे
			सुमारास कुर्डुवाडी ते बार्शी जाणारे रोडवर
			बाळेश्वर नाका येथे बार्शी
4	Name of the Injured/Deceased	:-	सुखदेव पाराजी गवळी रा.घाटपिंपरी ता.वाशी
			नि.उरमानाबाद
5	Name of Hospital to which he/she was removed	:-	जगदाळेमामा हॉस्पीटल बाशी
6	Number of vehicles and type of the vehicle	:-	रिवप्ट कार नं एम एच २४ ए एफ ०६४८
7	Name and address of the Driver of the vehicle	:-	संजय कानिफनाथ कदम वय २४ वर्ष रा.इसरूप
1	with particulars or Driving License of the said		ता.वाशी जि.उस्मानाबाद
	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.		
8	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	संजय कानिफनाथ कदम वय २४ वर्ष रा.
	as it stalles on the date of the desident.		इसरूप ता.वाशी जि.उस्मानाबाद
9	Name and adderss of the Insurance Company	:-	टाटा ए आय जी इन्शुरन्स
	with whom the vehicle was insured and the Divisional Office of the said Insurance		
	Company.		
10	Number of Insurance policy/Insurance	:-	पॉलीसी नं.62009619680000
	Certificate and the Date of validity of the insurance policy/Insurance Certificate.	ı	वैधता -दि.२६/१२/२०२२ ते दि.
	l l l l l l l l l l l l l l l l l l l		24/92/2023
11	Action taken, if any, and the result thereof.	;-	आरोपीस सीआरपीसी ४१(अ)(१) प्रमाणे
			नोटीस दिली आहे. स्विप्ट कार नं एम एच २४
			ए एफ ०६४८ची यांत्रीक तपासणी करून घेवून
			प्रमाणपत्र हस्तगत केले आहे.
	N.B - This form should accompany with all the necessary document viz. (1) F.I.R. (2) Panchanama (3)		
	Medical Certificate/Post-Mortem Report.		