

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

Sr.No.	Particulars		Remarks.
01	Name of the Police Station	:-	ERANDOL
02	CR.No./TAR No./SDE No.	:-	CR NO-45/2017 IPC 279,337,338,427 MVAct184,
03	Date,Time,and Place of the accident	:-	Date 21/08/2017 at 23.30 on .NH 6,at Erandol city Near Hotel Shivananad
04	Name of the Injured/Diceased	:-	Injured - GANGARAM BALAJI DAVANE Age
05	Name of Hospital to which he/she was removed	:-	ASHWINI Hospital,Jalgaon
06	No.of vehicles and type of the vehicles	:-	One vehicles -ÖË Trak No- WB23/F-B 9228 Bajaj Discover Motor Cycle -ÖËMH19/AZ2301
07	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 address of the Issuing Authority of the said Badge.	:-	RANJITKUMAR SUKDEV YADAV Resident A/P- 30/4 RB RD PS-BEHALA S24PGS ,West Bengal state Driving License No-WB2020010124074 Dumpper Truck Driver (TRANS)
08	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	UTPAL CHAKRABORTY Resident A/P- 42/70 KAZIPARA LANE BAIDABATIPS PS SERAMPORE,HOOGHLY 712222
09	Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Ofcece of the said Insurance Company.	:-	Reliance General Insurence Co.Ltd. 8TH FR,HIMALAYA HOUSE 38B JL NEHRU ROAD KOLKATTA (W.B) 700071
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Policy/Insurance Certificate No- 1506272334001473 Date of validity-03/02/2017 To 02/02/2018
11.	Action taken,if any,and the result therof	:-	Offence registered and police investigation is going on accused driver- RANJITKUMAR SUKDEV YADAV Statement of vitneses and ividence collection going on.inspectin of vehicle completed POLICE INSPECTOR ERANDOL POLICE STATION

