FORM COMP AA

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

Sr.No.	Particulars		
01	Name of the Police Station	:-	DHARANGAON
02	CR.No,/TAR No./SDE No.	:-	CR NO. 115/17,u/s. 304(A),279,337,338,427 M.V.Act. 184,134(B).
03	Date, Time, and Place of the accident	:-	Date- 21.09.2017 At 19.45 pm. N.H.NO.6 Road, Eklgnag Shiwar, Front of Trimurti Hotel, Tal.Dharangaon, Dist, Jalgaon.
04	Name of the Injured/Deceased	5-	Deceased- 1) Ashawin Bhikan Urf. Suresh Patil. Marathe Galli, Dharangaon, Tal. Dharangaon, Dist. Jalgaon. Injured - 1) Pankaj Urf. Kadu Rajaram Marathe, Age- 37, R/S. Marathe Galli, Dharangaon. Tal Dharangaon. Dist. Jalgaon.
05	Name of Hospital to which he/she was removed.	:-	1)Civil Hopital, Jalgaon.
06	No.of vehicles and type of the vehicles	:-	1)Truck No. OR-19/E-7151 (Accused) 2)Motor cycle No. GJ21/AD-3713 (Deceased-Person)
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.	4	1)Truck No. OR-19/E-7151 (Accused) BipinBhihari Firangi Sahu, Age- 60, Rayjaharan, Post. Jarapada, Dist. Angul, (Orissa) Driver Licence No.OR1919830058406
08	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	BipinBhihari Firangi Sahu, Age- 60, Rayjaharan, Post. Jarapada, Dist. Angul, (Orissa)
09	Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Offece of the said Insurance Company.	J.	Oriental Insuranse Company, Angul. (Orissa)
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.		345900/31/2017/5607
11.	Action taken, if any, and the result therof	:-	Dt. 23.09.2017 At. 19.10 pm. Chargesheet No. 87/2017 Dt. 20.11.2017 In Dharangaon Court. Sd/- Police Inspector, Dharangaon Police Station Dist . Jalgaon.