

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 Police Station, Dist. Jalgaon
02	Cr. No./TAR No./SDE No.	:-	42/2017 IPC 304(A), 279,337,338,427 M.V. Act 134(B), 184.
03	Date, Time and Place of the Accident	:-	Date : 14.04.2017, Time 11.30, Dharangaon To Chopda Road, Near Pimpale Fata, Tal. Dharangaon , Dist. Jalgaon.
04	Name of the Injured/Diceased	:-	Diceased – Prabhakar Vikram Patil, Age-36, R/S. Sakare, Tal. Dharangaon, Dist. Jalgaon.
05	Name of Hospital to which he/she was removed	:-	--
06	No. of Vehicles and type of the vehicles	:-	1)Motor Cycle No. MH-20/CX-0539 Rahil Vakar Kureshi, Age-22, R/S. Mohammadiya Nagar, Devpur, Dhule. Dist. Dhule.(Accused) 2)Motor Cycle No. MH-19/CB-1898 Prabhakar Vikram Patil, Age-36, R/S. Sakare, Tal. Dharangaon, Dist. Jalgaon.(Diceased)
07	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 address of the issuing Authority of the said Badge.	:-	1)Motor Cycle No. MH-20/CX-0539 Rahil Vakar Kureshi, Age-22, R/S. Mohammadiya Nagar, Devpur, Dhule. Dist. Dhule.(Accused)
08	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	---
09	Name and address of the insurance Company with whom the vehicle was insured and the Divisional Office 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	:-	Dhangaton Police Station Bhag - 5 C.R. No. 42/2017 IPC 304(A),279,337,338,427, M.V. Act 184, 134(B), Date - 15.04.2017, Time 04.15. Chargsheet NO. 40/2017 Date- 23.06.2017

			Send in court, Dharangaon.
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