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	:-	Jamner P.S.
02	CR.No,/TAR No./SDE No.	:-	Cr no. 115/17 ipc 304(A),279,337,338,427 mv act 184, 134(b)
03	Date,Time,and Place of the accident	:-	30/07/2017 time 19.30 Jamner To Bodwad Road Near Sonari Phata
04	Name of the Injured/Diceased	:-	Sarala Umesh Mali Age-36 R/O Jamner Mali Wada, Jamner
05	Name of Hospital to which he/she was removed	:-	Civil Hospital Jalgaon
06	No.of vehicles and type of the vehicles	:-	Piggio Rikshow No. MH-19/BJ-6326
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.	:-	Piggio Rikshow Driver Licence No. MH1920110008273
08	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	Piggio Rikshow Owner Name Ramdas Fakira Tayade R/O Bodwad Dist-Jalgaon
09	Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Offece of the said Insurance Company.	:-	IFFCO Tokiyo Genral Insurance Company LTD
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Piggio Rikshow - Policy No. 1-48GPZSP,P400Policy#95692633 Date of Validity -28/12/2016
11.	Action taken,if any,and the result therof	:-	The crime has been registered and the police investigation is Complited. The Piggio Rikshow has hit by the accident. The vehicle inspections is complete Sd/-- Police Inspector, Jamner Police Station, Dist.Jalgaon.