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. 175/17 ipc 279,337,338,427 mv act 184, 134 (b)
03	Date,Time,and Place of the accident	:-	03/12/2017 time 16.30 Jamner To Fattepur Road Near Bell Phata
04	Name of the Injured/Diceased	:-	Ramchandra Laxman Johare age-60 R/O Hiwarkheda Tal-Jamner
05	Name of Hospital to which he/she was removed	:-	Civil hospital Jalgaon
06	No.of vehicles and type of the vehicles	:-	Truck No. MH-41/G-6414 V/S Bajaj Paltina Motar Cycle No. MH-19/CD-2598
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.	:-	Truck Driver Licence No.MH1920080028721 Bajaj Paltina Motar Cycle Driver Licence is Not Avilable
08	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	Truck Owner Name-Sk. Lukman Sk. Lal R/o Madani Nagar, Jamner Bajaj Paltina Motar Cycle Owner- Bajirao Ramchandra Johare R/O hiwarkheda
09	Name and Address of the Insurance Company with whom the vehicle was insured and the Divisional Offece of the said Insurance Company.	:-	Bajaj Allianz Insurance Company
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Policy No. OG-17-2002-1831-00001421 Date of Validity 28/03/2018
11.	Action taken,if any,and the result therof	:-	The crime has been registered and the police are investigation The Truck has hit by the accident. The vehicle inspections is complete Police Inspector, Jamner Police Station, Dist.Jalgaon.