FORM COMP AA

[See Rules 253 ©, 254 (c) (iii) , 254 (80 255 (1) (iv)]

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1.	Name of the Police Station	:-	Kankavali Police Station
2.	CR. NO./TAR No./ SDE No.	:-	CR NO.287/2024 BNS 281, 125(a),125(b),M.V.Act 184
3.	Date. Time and place of the accident.	:-	Date -02/10/2024 Time -08.16 Place-Nadgive,Tal-Kankavali
4.	Name of the Injured /Deceased	:-	Injured - 1)Dipak Sharma,2) Ravikant Sharma 3) Jayram Ramchandra Gurav 4) Jayshri Jayram Gurav
5.	Name of Hospital to which he /she was removed.	:-	Sub District Hospital,Kankavali
6.	Number of vehicles and type of the vehicle.	:-	Swift Car- MH 10 CX 9910 Swift Dzire-MH 01 CP 7826
7.	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 the address of the Issuing Authority of the said Badge.	:-	Dipesh Narendra Bhillari,A/P-Mankhurd,Mumbai (Swift Dzire-MH 01 CP 7826) Licence-The union of india maharashtra state motor driving licence Licene No-MH0320150001320 Issuing Authority-MH03 Nikhil Narendra Kulkarni,Age 38, A/P-Devsu,Tal-Sawantwadi (Swift Car- MH 10 CX 9910) Licence-The union of india maharashtra state motor driving licence Licene No-MH1020080006716 Issuing Authority-MH10201264
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	Sayali Nikhil Kulkarni, A/P-Devsu,Tal-Sawantwadi (Swift Car- MH 10 CX 9910) Snehal Shrikrush Parab,A/P-Kankavali (Swift Dzire-MH 01 CP 7826)

9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	SBI General Insurance, Sangali (Swift Car- MH 10 CX 9910)
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Policy NO-1120672/C03669225 Date-10/04/2024 To 09/04/2025
11.	Action taken, if any, and the result thereof.	:-	The Chargesheet Sent To Court.

Inspector of Police,
Kankavali Police Station.

N.B – This form should accompany with all the necessary document viz. (1) F.I.R (2) Panchana ma
(3) Medical Certificate/Post –Mortem Report.