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	:-	कणकवली पोलीस ठाणे
2.	CR. NO/TAR No./ SDE No.	:-	गुन्हा रजि नं १०६/२०२६ BNS २०२३ चे कलम १०६(१),१२५(a),१२५(b),२८१ मो वा अधि १९८८ चे कलम १८४ प्रमाणे
3.	Date, Time and place of the accident.	:-	दि.०९/०५/२०२६ रोजी १०.०० वा चे सुमारास मुंबई ते गोवा महामार्ग ६६ वर ओटव फाटा,नांदगाव ता. कणकवली जि सिंधुदुर्ग
4.	Name of the Injured /Deceased	:-	सौ मिरा सचिन सावंत, वय ४८ वर्षे रा. स्नेहवैभव बिल्डींग कन्नमवारनगर विक्रोळी मुंबई
5.	Name of Hospital to which he /she was removed.	:-	उपजिल्हा रूग्णालय कणवकली .
6.	Number of vehicles and type of the vehicle.	:-	१. मारुती सुझुकी कंपनीची इर्टिगा गाडी नं MH ४८AK५६३९
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.	:-	मारुती सुझुकी कंपनीची इर्टिगा गाडी नं MH ४८AK५६३९ वरील चालक सचिन भास्कर सावंत वय ५१वर्षे रा. स्नेहवैभव बिल्डींग कन्नमवारनगर विक्रोळी मुंबई लायसन्स नं - MH०३ २००९०११५४३६ ISSUSED BY - २६/०९/२०२५ TO ०२/०९/२०३५
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	मारुती सुझुकी कंपनीची इर्टिगा गाडी नं MH ४८AK५६३९ चे मालक श्रीधर गजानन घारपुरे रा कासानाका व्हिलेज कासा ता डहाणू पालघर जि पालघर
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	ACKO General Insurance Co Ltd
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	पॉलिसी नं - DCAR१०४७४१७१९३४/०१ दिनांक २०/०१/२०२६ ते १९/०१/२०२७
11.	Action taken, if any, and the result thereof.	:-	सदर गुन्हाचा तपास सुरु आहे.

Inspector of Police,
Kankavali..Police Station.

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