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	:-	Dodamarg Police Station
2.	CR. NO./TAR No./ SDE No.	:-	Cr. no. 90/2024 B NS-281,125(a)(b), 105, MV act-185,184
3.	Date, Time and place of the accident.	:-	17/09/2024, 09.00 am, Vayangantad Tal-Dodamarg
4.	Name of the Injured /Deceased	:-	1.Madhukar Shetkar R/O Ghodgewadi Tal-Dodamarg 2.Anamari Migel Force R/O Tilari Tal Dodamarg
5.	Name of Hospital to which he /she was removed.	:-	1.Rural Hospital Bhedshi 2.Bambolim Goa Medical college
6.	Number of vehicles and type of the vehicle.	:-	1. GA 11 B 2060 Mestro 2. MH 07 P2598 Bolero Pickup
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.	:-	1.Madhukar Shetkar R/O Ghodgewadi Tal-Dodamarg 2.Adam husain Naikwadi R/O Sateli Bheshi tal- Dodamarg
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	1.Madhukar Shetkar R/O Ghodgewadi Tal-Dodamarg 2.Adam husain Naikwadi R/O Sateli Bheshi tal- Dodamarg
9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	Motor Commercial vehicle package policy Sawantwadi Sindhudurg
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Motor Commercial vehicle package policy Police No. 3379/03763783/000/00 Valid 18/01/2025
11	Action taken, if any, and the result thereof.	:-	The Charge Sheet sent to Court

H.B. Khopde
Inspector of Police,
Dodamarg Police Station.