FORM COMP AA

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

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1	Name of the Police Station	Kankavli
2	CR.NO./TAR No./SDE No.	260/2024 BNS 281, 125(A), 125(B) mvact 184, 3(1)/181, 146/196, 115/177.
3	Date, Time and Place of the accident	Date of accident-15/09/2024 Time of accident – 09:30 pm Place of accident – Nandgoan on Bombay-goa high-way Road, Infront of Greenfild Hotel, Tal-kankavali, Dist-sindhudurg
4	Name Of the Injured/Deceased	1. Jatin shankar Killare, (Injured) 2. Santosh Vasant Chalake, (Injured)
5	Name of Hospital to which he/she was removed	Sub District Hospital Kankavali Dist- Sindhudurg.
6	Number Of Vehicles and type of the vehicles	1. Hero Maestro Edge No. MH-07-AF-6656
7	Name and address of the Driver of the vehicle with particulars or Driving License of the saod driver and the address of the issuing authority of the said Driving License. The number of Badge in case of Public Service Vihicle and the address of the Issuing Authority Of the said Badge	Santosh Vasant Chalake **Present Add-** AT/Post- Belane Khurd, Khalchivadi, Tal- Kankavli, Dist-Sindhudurg **Permanant Add.-** AT/Post- Belane Khurd, Khalchivadi, Tal- Kankavli, Dist-Sindhudurg Driving License - No Hero Maestro Edge No. MH-07-AF-6656. (MH07 – RTO Sindhudurg Maharashtra)
8	Name and address of the Owner of vehicle as it stands on the date of the accident.	Nilesh Vittal Mungekar **Present Add-** AT/Post- Belane Khurd, Varchivadi, Tal- Kankavli, Dist-Sindhudurg **Permanant Add.-** AT/Post- Belane Khurd, Varchivadi, Tal- Kankavli, Dist-Sindhudurg
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance Company	No Insurance.
10	Number of Insurance Policy/ Insurance Certificate and the Date of Validity of the Insurance Policy/ Insurance Certificate.	No Insurance.
11	Action taken, if any, and the result there of	Kankavli police station CR.no. 260/2024 BNS 281, 125(A), 125(B) mvact 184, 3(1)/181, 146/196, 115/177 is ragisterd. HBKhade. Inspecter of Police Kankavali Police Station

N.B- This form should accompany with all the necessary document viz (1) FIR, (2) Panchnama, (3) Medical certificate/Post Mortem Report