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
2.	CR. NO./TAR No./ SDE No.	:-	CR No. 52/2025, BNS-281.125(a).125(b). M.V.ACT-184
3.	Date. Time and place of the accident.	:-	Date-20/01/2025 TIME-11.45 Place- Tiware Fata, Tal-kankavali
4.	Name of the Injured/Deceased	:-	Injured- Shrihari Vinod tevilkat,Age22, A/P -Teliaali,Tal-Kankavali
n	Name of Hospital to which he /she was removed.	:-	Sub District Hospital,Kankavali
6.	Number of vehicles and type of the vehicle.	:-	Tvs 2Wheeler-MH 05 DT 0004 Enova Car- MH 10 CK 0101
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.	:-	Shrihari Vinod tevilkat,Age22, A/P - Teliaali,Tal-Kankavali (Tvs 2Wheeler-MH 05 DT 0004) License.-The union of india maharashtra driving license No.-MH07 20210001043 Issuing Authority- MH07 Mandar Mule, Age 35,A/P- Shahu Colony Kolhapur (Enova Car- MH 10 CK 0101) License.-The union of india driving license No.-MH09200401711 78 Issuing Authority- MH09
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	Shrihari Vinod tevilkat,Age22, A/P - Teliaali,Tal-Kankavali (Tvs 2Wheeler-MH 05 DT 0004) Mandar Mule, Age 35,A/P- Shahu Colony Kolhapur (Enova Car- MH 10 CK 0101)
9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional	:-	Cholamandalam MS General Insurance Co.Ltd.Mumbai

	Office of the said Insurance Company.		
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Policy No-TIT92118489 DATE-18/12/2021 To 17/12/2022
11.	Action taken, if any, and the result thereof.	:-	The charge sheet 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) Panchanama (3) Medical Certificate/Post –Mortem Report.