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	:-	Kankavli
2.	CR. NO./TAR No./ SDE No.	:-	CR.NO-292/2025, BNS sec.106(1), 125(a), 125(b), 281 M.V.ACT-184
3.	Date, Time and place of the accident.	:-	Date-18/10/2025 Time-12.05 Place – Audumbar nagar, Talere, Tal-kankvli, Dist-sindhudurg
4.	Name of the Injured /Deceased	:-	Chandrakant Krushanaji Fondake, Age-68, Address- Fonda bajarpeth, Tal-kankvli, Dist-sindhudurg
5.	Name of Hospital to which he /she was removed.	:-	Sub District Hospital, Kankavli
6.	Number of vehicles and type of the vehicle.	:-	1) Maruti Suzuki celerio KA-22-MA-9908 2) Honda Activa-MH-07-AV-6516
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) Hemant suresh remanache, age-32, Address- S NO148/2 PLOT NO 7, MATOSHRI BUILDING, SAI SHRADHA COLONY BHAGYA NAGAR TILAKWADI BELGAUM-590006 (Maruti Suzuki celerio KA-22-MA-9908) Licence no.KA22 20190009044 2) Chandrakant Krushanaji Fondake, Age-68, Address- Fonda bajarpeth, Tal-kankvli, Dist-sindhudurg (Honda Activa-MH-07-AV-6516) Licence no.MH07 19820002752
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	1) Suresh Hanamant Remanache, Address- S NO148/2 PLOT NO 7, MATOSHRI BUILDING, SAI SHRADHA

			COLONY BHAGYA NAGAR TILAKWADI BELGAUM-590006 (Maruti Suzuki celerio KA-22-MA-9908) 2) Prajakta Chandrakant Fondake, Address- Fonda bajarpeth, Tal-kankvli, Dist-sindhudurg (Honda Activa-MH-07-AV-6516)
9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	Go Digit General Insurance Ltd
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Policy no –D211670846/06072025 Date-06/07/2025 to 05/07/2026
11.	Action taken, if any, and the result thereof.	:-	The charge sheet send to court

Asst. Inspector of Police,
Kankavli 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.