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. 335/2024, BNS-281,125(a).125(b) M.V.ACT-184
3.	Date, Time and place of the accident.	:-	Date-24/11/2024 TIME-10.00 Place- Shivaji Chowk, Tal-kankavali
4.	Name of the Injured/Deceased	:-	Injured - Soham Santosh Dalvi, Age -19 A/P- Kalsuli, 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.	:-	2 Wheeler-MH 07 AT 8035 2 Wheeler- MH 07 AM 5727
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.	:-	Soham Santosh Dalvi, Age -19 A/P- Kalsuli, Tal-Kankavali (2 Wheeler-MH 07 AT 8035) Bhartbhai Vasharambhai Bhojiya,A/P- Kalmath,Tal-Kankavali (2 Wheeler- MH 07 AM 5727) The union of india maharashtra state motor driving licence no.-GJ 1320050002185 Issuing Authority-GJ 13
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	Soham Santosh Dalvi, Age -19 A/P- Kalsuli, Tal-Kankavali (2 Wheeler-MH 07 AT 8035) Bhartbhai Vasharambhai Bhojiya,A/P- Kalmath,Tal-Kankavali (2 Wheeler- MH 07 AM 5727)
9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	Bajaj Allianz General Insurance Company Ltd,Pune
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	Policy No-OG25-1703/1826/00000761 Date-08/08/2024 To 07/08/2025

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.