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	SAWANTWADI
2	CR.NO./TAR No./SDE No.	CR NO.**05/2024** u/s 304(A),279,337,338 IPC r/w M.V.Act. u/s 184.
3	Date, Time and Place of the accident	Date- 03/01/2024 , Time – 16.30 hrs, Place- On the road of Amboli to Ajara, Amboli Nagertas, Tal-Sawantwadi, Dist- Sindhudurg.
4	Name Of the Injured/Deceased	1) Dattatray Venkat Jadhavar (Deceased) 2) Sunil Krishna Kulbhaiya (Injured) 3) Navnath Vithoba Jadhavar (Injured) 4) Mahadev Bhagwan Bangar (Injured) 5) Ganesh Dilip Salunkhe (Injured) 6) Balaji Bhagwan Banger (Injured) 7) Vishnu Ankush Banger (Injured)
5	Name of Hospital to which he/she was removed	Primary Health Center Amboli, Tal - Sawantwadi, Dist- Sindhudurg
6	Number Of Vehicles and type of the vehicles	1) Thar Motor Car No. **MH 25 BA 7172**
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 Vihicle and the address of the Issuing Authority Of the said Badge	**Driver Name** – Sunil Krishna Kulbhaiya **Present Add.** – At Post Beed, Korwadi Fata, Samanpur, Tal-Beed, Dist-Beed. Mob.No. 9309584910. **Permanant Add.** – Indiranager, Shirur (Kasar),Tal-Shirur, Dist-Beed. **Driving License No** – MH23 20220007288. Address of the issuing authority- MH 23
8	Name and address of the Owner of vehicle as it stands on the date of the accident.	**Owner Name** – Shri. Mahadev Bhagwan Bangar **Add.** – Sudamati Nivas Police Station samor, Laxmi Parvti Nager, Yermala, TQ-Kalamb, Dist- Dharashiv, Pin - 413525.
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance Company	**Reliance General Insurance Company Limited.** **Policy Issuing Branch** – Unit No. 211 & 212, 2nd floor, Yash Plaza, Near Shivneri Gate, Kava Road, Latur, Maharastra – 413512. **Registered & Corporate Office** – 6 th, floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway. Goregaon (East), Mumbai – 400 063.
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	Policy No. 202422423740000024. Validity Date – Midnight of 31/12/2024
11	Action taken,. if any, and the result there of	The Chargesheet send to Court.

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

Police Sub - Inspecter
Sawantwadi Police Station
Sindhudurg.