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.152/2025 u/s 106(1),125(a),125(b),281 IPC r/w M.V.Act. u/s 184.
3	Date, Time and Place of the accident	Date -08/08/2025, Time – 16.45, Place - On the road of Sawantwadi to Kudal (Old Express Highway No.17), Opposite of Ambika Fabrication workshop, Sawantwadi, Tal-Sawantwadi, Dist- Sindhudurg.
4	Name Of the Injured/Deceased	1) Rupesh Anil Patkar, Age-39 Year (Deceased)
5	Name of Hospital to which he/she was removed	Sub Divisional Hospital, Sawantwadi, Dist- Sindhudurg
6	Number Of Vehicles and type of the vehicles	1) Motor Cycle No. MH 07 V 0635 2) S.T.Bus No. MH 20 BL 2141
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	1) Driver Name – Rupesh Anil Patkar, Present Add. - At Post Pinguli, Kudal, Tal. Kudal, Dist.- Sindhudurg. Permanant Add. - At Post Kumbharwada, Mazgaon, Tal. Sawantwadi, Dist.- Sindhudurg. Driving License No – MH07 20120010263 Address of the issuing authority - MH07 201341. 2) Driver Name – Kunal Hanumant Satardekar, Present Add. - H.No.-337, At Post-Morgaon, Wayanganwadi, Tal.-Dodamarg, Dist.- Sindhudurg. Permanant Add. - As Above Driving License No – MH07 20070000289. Address of the issuing authority - MH07.
8	Name and address of the Owner of vehicle as it stands on the date of the accident.	1)Owner Name - Nitin Anil Patkar Add. - At Post Kumbharwada, Mazgaon, Tal. Sawantwadi, Dist.- Sindhudurg. 2) Owner Name - Maharastra State Road Transport Corporation, Division Sindhudurg
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance Company	1) No Insurance 2) Maharastra State Road Transport Corporation.
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	--
11	Action taken,, if any, and the result there of	Crime registered and Investigation ongoing.

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.