# FORM COMP AA

[ See Rules 253 (C), 254 (c)(iii), 254 (80 255(1)(iv) ]

REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

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| 1 | Name of the Police Station | SAWANTWADI |
| 2 | CR.NO./TAR No./SDE No. | CR NO.02/2024u/s 304 (A), 279, 337, 338 r/wM.V.Act. u/s 184 |
| 3 | Date, Time and Place of the accident | Date-01/01/2024 , Time – 05.00,<br>Place- On the road of Sawantwadi to Kudal, In front Of Shailu Pai Hardware Store, Kolgaon, Tal-Sawantwadi, Dist- Sindhudurg. |
| 4 | Name Of the Injured/Deceased | 1) Aishwarya Mahesh Kavthankar, Age-21 Year ( Deceased )<br>2) Vasudev alis Sahil Santosh Tendolakar, Age- 19 Year (Injured)<br>3) Nikhil Lawoo Kavthankar, Age- 21 Year(Injured) |
| 5 | Name of Hospital to which he/she was removed | Sub Divisional Hospital, Sawantwadi,<br>Dist- Sindhudurg |
| 6 | Number Of Vehicles and type of the vehicles | Maruti Suzuki MotorCar No. **MH 07 Q 0278** |
| 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 –Sindhant Ashok Bandekar,<br>Present Add. - C/O: Ashok Suman Bandekar, 638, Kudal Bazarpeth, Near Maruti Mandir, Kudal, Tal-Kudal, Dist-Sindhudurg.<br>Permanant Add. - As Above<br><br>Driving License No – LL No. MH07/0008002/2023<br><br>Address of the issuing authority- R.T.O. Sindhudurg. |
| 8 | Name and address of the Owner of vehicle as it stands on the date of the accident. | Owner Name - Smt.Deepti Ashok Bandekar<br>Add. - 638, Kudal Bazarpeth, Near Maruti Mandir, Kudal, Tal-Kudal, Dist-Sindhudurg. |
| 9 | Name and address of the Insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance Company | -- |
| 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 | The Charge Sheet 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.