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	:-	Kudal
2.	CR. NO./TAR No./ SDE No.	:-	214/2024
3.	Date, Time and place of the accident.	:-	28/09/2024 at 21.45 hrs. At- Front of Old Cocacola Factory Akeri Tal Kudal
4.	Name of the Injured / Deceased	:-	1) Kishan Keshav Pingulkar , 21 yrs (Deceased)
5.	Name of Hospital to which he /she was removed.	:-	1) sub District Hospital Sawantwadi
6.	Number of vehicles and type of the vehicle.	:-	MH 07 AE 2019 Honda Livo Motarcycle
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.	:-	Kishan Keshav Pingulkar, Adress- At Post- Pinguli AmbedkarNagar Tal Kudal License – No License
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	MH 07 AE 2019 Honda Livo Motarcycle Owner –Yashvant ramchandra jadhav, Adress- At Post- Terse Babmbarde Ambedkarnagar Tal Kudal
9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	MH 07 AE 2019 Honda Livo Motarcycle Insu. Company –Go Digit Gen. Insurance LTD
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:-	MH 07 AE 2019 Honda Livo Motarcycle Insu. Company –Go Digit Gen. Insurance LTD Date – 09/03/2024
11.	Action taken, if any, and the result thereof.	:-	Abited Final Out No 8269/2024 date 26/12/2024

Inspector of Police,
kudal police station

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