


क्र. / दि. 1538/17
दिनांक 4/10/17

FORM COMP AA
[See Rules 253 ©, 254 (e) (iii), 254 (80 255 (1) (iv)]
REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1.	Name of the Police Station	:- Badnewa Amravati City
2.	CR. NO./TAR No./ SDE No.	:- 487/17 - 279, 427 TR
3.	Date, Time and place of the accident.	:- 01/9/2017 - 14.00 to 14.15 @ B Ram Mishra College chok Badnewa Super Highway
4.	Name of the Injured /Deceased	:- Ravindra Mahikrao Metkari AS New Prabhu colony Amravati
5.	Name of Hospital to which he /she was removed.	:- Nil
6.	Number of vehicles and type of the vehicle.	:- MH27-BE-3035 Swift Dzire
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.	:- Prashant Dhondus Hinghe BR - Hinghe wadi Heem Shikhar nagar Anjan nagar Amravati DLHO - MH27-20110005713 Valid till - 15-06-2017 (TR) LMV-TR - 31-01-2011 RTO Amravati
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:- Ritesh Ramesh Rao Telmore AIR Priyanka colony HR Gasan Temple Shegaon Rakutgaon Road Amt
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 Co. LTD - AIR CE Plaza Airport Road, Yenwade, Pune - 41100
10.	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	:- 06-18-2008-1801-00000109 22-04-17 to 21-04-2018 midnight
11.	Action taken, if any, and the result thereof.	:- —
		Inspector of Police,
	Police Station.
<p>N.B - This form should accompany with all the necessary document viz. (1) F.I.R (2) Panchanama (3) Medical Certificate/Post -Mortem Report.</p>		


 वरिष्ठ पोलीस निरीक्षक
 पोलीस स्टेशन, बडनेरा
 अमरावती (शहर)