

जायक/आतक क्र. 1967/27 (21)  
दिनांक 7/8/2017

### FORM COMP AA

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

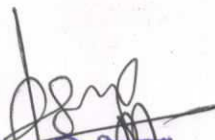
### REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1.	Name of the Police Station	-	Frezarpura Amravati
2.	CR. NO./FAR No./ SDE No.	-	608/2017 Sec-279, 337 IPC
3.	Date, Time and place of the accident.	-	19-7-2017 at 21-30 p.m. Vanshri colony.
4.	Name of the Injured /Deceased	-	Shubham Ramdas Patil
5.	Name of Hospital to which he /she was removed.	-	General Hospital Amravati
6.	Number of vehicles and type of the vehicle.	-	MH-30 AR- 2813 Pulsar AS-150
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.	-	MH-2 Nitin Madhukar Thorat at - Po. Jasapur. P. Asara. Dist Amravati. MH-27-20130014287
8.	Name and address of the Owner of the vehicle as it stands on the date of the accident.	-	Bajrang. Shanikarnu Adchule at - Borgaon mansu. Tal. Di. Akola.
9.	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company	-	Oriental insurance Company.
10.	Number of Insurance Policy Insurance Certificate and the Date of Validity of the insurance Policy Insurance Certificate.	-	182200/31/2017/2515 06-10-2016 to 05-10-2017
11.	Action taken, if any, and the result thereof.	-	Sec. 279, 337. IPC

Inspector of Police,

Frezarpura, Police Station

N.B - This form should accompany with all the necessary documents viz. (1) F.I.R. (2) Panchanama (3) Medical Certificate Post Mortem Report.

  
पोलीस निरीक्षक  
पोलीस स्टेशन फ्रेजरपुरा  
अमरावती शहर

  
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