


FORM COMP AA

(See Rules 253 © (iii), 254 / 80 255 (1) (iv))

REPORT ABOUT MOTER VEHICLES ACCIDENTS

1	Name of the Police Station	-	काटोल जि. नागपुर (या.)
2	CR.No./TAR No./SDE No.	-	156/18 कलम 279,337,338 304(अ)भादवी सहकलम 184, मो.वा.का.
3	Date, Time and Place of the accident	-	नौजा परसोडी शिवर दि. 25/02/18 वे 16.30 वा. दरन्यान
4	Name of the Injured / Deceased	-	मृतक 1) सौरभ अशोक निवा वय 22 वर्ष, रा. काटोल 2) संकेत विलासराव मन्तराम वय 15 वर्ष रा. परसोडी ता. काटोल व
5	Name of Hospital to which he/she was removed.	-	मानेग रुग्णालय काटोल
6	Number of vehicles and type of the vehicle.	-	टाटा सुनो गाडी क्र. एन.एच. 27 एच. 0573
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.	-	टाटा सुनो गाडी क्र. एन.एच. 27 एच. 0573 चा चालक नामे विनोद शिरतागर रा. लडगाव ता. काटोल जि. नागपुर
8	Name and address of the Owner of the vehicle as it stands on the date of the accident.	-	चन्द्रयान रमेशराव भोंडे वय 25 वर्ष रा. हिवरखेड ता. मोशी जि. अमरावत
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	-	नाही
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the Insurance Policy /Insurance Certificate.	-	नाही
11	Action taken. If any and the result thereof.	-	तपास सुरु आहे.


शेखार वि. राठोड
पोस्टमि./पो.स्टे.काटोल