



FORM COMP AA

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

Police Station:	SAKOLI
CR.No./TAR NO./SDE NO:	14/21 SECTION 279,337,304(A) IPC R/W 184,3(1)/181,139/177 MV.ACT.
Date, Time & Place of accident:	Place- Umarzari Date 14/01/2021 At 20/15 Pm
Name of the Injured/Deceased:	Deceased- Dhyaneshwar Antaram Sirsam Age-42 Yrs Add- Umarzari
Name of Hospital to which he/she was removed:	Dr. Chandwani Hospital Sakoli
Number of vehicles and type of the vehicle:	MOTOR CICLE NO. MH-36/A-3976
Name and address of the driver of the vehicle with particulars or Driving license of the said Driver and the Issuing Authority of the said Driving License:	Nikhil Devram Madavi Age- 24 Yrs Add- Borgaon/Rajegaon Tah-Lakhani Dist-Bhandara
The number of Badge in case of public service vehicle and the address of the Issuing Authority of the said Badge:	NO.
Name and address of the Owner of the vehicle as it stands on the date of the accident:	Nill
Name and address of the Insurance Company with whom the vehicle was insured and the Divisonal Officer of the said insurance Company:	Nill
Number of insurance policy/Insurance certificate and the date of vehicle of the insurance policy/Insurance certificate:	NILL
Action taken,if any,and the result thereof:	Police Pending

Inspector of Police

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