


FORM COMP AA

[see rules 253 (C) (iii), 254 (80) 255(1)(iv)]

REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS

1	Name of the police station	:-	Sinhgad Road
2	CR.NO/TAR NO/ SDE NO.	:-	277/2017 I.P.C Code 279,338 MVA 184.119/177
3	Date, Time and Place of the accident	:-	23/08/2017 ; time: 18.30pm; Sinhgad college road Near Raj Washing Centre, in front of Lokhande House.
4	Name of Injured/ Deceased	:-	Chandrakant Vittal Mankar
5	Name of the hospital to which he/she was removed	:-	First Chinchankar Hospital Sinhgad Road Secnd Kirkee Military Hospital -pune
6	Number of the Vehicles and type of the vehicle.	:-	One bike of No. MH12 LG 2754
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.	:-	Shubham Sachin Jadhav Address. Daulatnagar society bangle no.38, Dhanakwadi, Pune Lisense no. MH12 20170104413 Authority: Pune RTO
8	Name and address of the Owner of the vehicle as it stands on the date of the accident.	:-	Sanchin Chandrakant Jadhav Address. Daulatnagar society bangle no.38, Dhanakwadi, Pune
9	Name and address of the Insurance Company with whom the vehicle a insured and the Divisional Office of the said Insurance Company.	:-	No Insurance
10	Number of Insurance Policy/ Insurance Certificate and the Date of Validity of the Insurance Policy/ Insurance Certificate.	:-	No
11	Action taken, if any, and the result thereof.	:-	As Per, IPC 279/338 MVA 184/119/177, investiongation in progress

Inspector of Police**Sinhgad Road Police Station Pune City**


सिंहगड रोड, पोलीस ठाणे, पुणे शहर