

## FORM COMP AA

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

### REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS

1	Name of the police station	:-	UTTAMNAGAR POLICE STATION
2	CR.NO/TAR No/SDE No	:-	CR.NO. 90/2017 U/S IPC 304 (a), 338,279.
3	Date, Time and Place of the accident	:-	10/11/2017 AT 12/30. HURISHKUMAR SUPER MARKET SAMOR, NDA ROAD, SHINDEPUL, SHIVNE, PUNE.
4	Name of the Injured/Deceased	:-	Deceased - KOUSHLYA DATTATRY MOHOL AT POST-MUTHA, TAL- MULSHI, NEAR VITTHAL MANDIR, PUNE-412115 Injured - AMIT DATTATRY MOHOL AT POST- 207 PUDHACHI ALI BHAGH KRA84, MUTHA, TAL- MULSHI, DIS- PUNE-411042
5	Name of the Hospital to which he/she was removed.	:-	Deenanath mangeshkar hospital PUNE. Sasun hospital, pune
6	Number of the Vehicles and type of the vehicle.	:-	1) Hero Honda super splendor MOTARCYCLE NO. MH-12/HM-5183 AND 2) DHAMPER PHEVAR MACHIN NO.200701128
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.	:-	1)AMIT DATTATRY MOHOL AT POST- 207 PUDHACHI ALI BHAGH KRA84, MUTHA, TAL- MULSHI, DIS- PUNE-411042 Driving license no. - MH 12 20140038814 Issued by R.T.O. - PUNE 2) JILANI BASHIR SHAIKH, AGE- 34 , ADD- AMBEGAON KHURD, JAMBULWADI ROAD, PUNE Driving license no. - NOT AVELEBAL Issued by R.T.O. -
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	:-	DATE OF ACCIDENT -10/11/2017 1) splendor MOTARCYCLE NO. MH-12/HM-5183 OWNER NAME- KARPE PRAKASH MARUTI ADD- SN0-129A/A2/A SHHENDAKAE APTS DATTAWADI 2) DHAMPER PHEVAR MACHIN NO.200701128- OWNER NAME- TRIMURTI STONE METAL CO.
9	Name and Address of the Insurance company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	THE NEW INDIA INSURANCE, CO. LTD 87 MAHATMA GANDI MARGA PORT ,MUMBAI 400001
10	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance.Policy /Insurance Certificate.	:-	15350044160700000006 DATE- 24/11/2016 TO 23/11/2017
11	Action taken, if any, and the result thereof.	:-	Chargesheet file in court agains JILANI BASHIR SHAIKH

Inspector of Police  
Uttamnagar police station  
Pune city