

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	:-	Kondhwa police station pune city
2	CR.NO/TAR No/SDE No	:-	241/2017 ipc 279,304(a) m.v act 119/177,184,132(1)(c)
3	Date, Time and Place of the accident	:-	23/04/2017 time 12/15pm Vetal chowk kondhwa pune.
4	Name of the Injured/Deceased	:-	deceased:1)sania taufik attar age 12 yr r/a kondhwa khurd pune Injured:1) tarnum sherkhan pathan age35yr r/a shivneri galli no 12 pune. 2)swali sherkhan pathan age14yr 3)alfia sherkhan pathan age12yr 4)tausim taufik attar age30 yr 5)sohel taufik attar age5 yr 6)swalia sherkhan pathan age14yr 7)sherkhan jemirkhan pathan
5	Name of the Hospital to which he/she was removed.	:-	Sasoon hospital pune
6	Number of the Vehicles and type of the vehicle.	:-	Auto reksha MH12/EF4502
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.	:-	sherkhan jemirkhan pathan age 40 yr r/a line no 12 shivneri nager mahi apartment kondhwa pune. License.not avilable
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	:-	Samptrao pandurang rokade at post Bombay puna road bapodi pune.
9	Name and Address of the Insurance company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	FUTURE genral insurance company No:2016-V4702699-fcv
10	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Police /Insurance Certificate.	:-	Validty:28/10/2017
11	Action taken, if any, and the result thereof.	:-	Chargesheet is submitted against the accuse Charge sheet no:
			Inspector of Police
			Police station name -

