

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	:-	Bharti vidyapeth police staion
2	CR.NO/TAR No/SDE No	:-	276/2017 279 304 (A) MV ACT 184 119/177
3	Date, Time and Place of the accident	:-	10/08/2017 AT 22/30 Harshli furniture peruche baugejaval katraj kondhwa road gokulnagar katraj pune
4	Name of the Injured/Deceased	:-	Kalappa shrimant molekari
5	Name of the Hospital to which he/she was removed.	:-	sasoon hospital pune
6	Number of the Vehicles and type of the vehicle.	:-	Vehicles not found (hit n run)
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.	:-	Vehicles not found (hit n run)
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	:-	Vehicles not found (hit n run)
9	Name and Address of the Insurance company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.	:-	Vehicles not found (hit n run)
10	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Police /Insurance Certificate.	:-	Vehicles not found (hit n run)
11	Action taken, if any, and the result thereof.	:-	Vehicles not found (hit n run)
			now the cr was sending for a final till pending when driver will found it will again open case....
			Inspector of Police API V M Mahamunkar
			Police station name - BHARTI VIDYAPETH POLICE STATION
N.B- This form should accompany with all necessary document viz. 1) F.I.R 2) Panchnama 3) Medical Certificate /Post Mortem Report.			

<https://www.microsoft.com/en-in/download/details.aspx?id=7>