

FORM COMP.AA [See Rules 253 ©, 254 (c) (iii, 254 (80), 255 (1) (iv)] REPORT
ABOUT THE MOTAR VEHICLES ACCIDENTS

1	Name of the Police Statoin	:-	GANESHPURI POSTE
2	CR.NO./TAR No./SDE No.		CR No I 229/2025 BNS – 281,125(a),125(b) MV ACT 184
3	Date, Time and Place of the accident. .		DATE-20/11/2025 Mumbai-Vadoar Highway road near Ghotgaon village
4	Name of the Injured / Deceased		Deceased Name-Ganesh Jivan Gulum at-Newal pada,Tal-Wada Dist-Palghar Injured Name-Sanjay Dharma Bhoir age-28 yrs.At-Lohape Tal.Wada Dist-Palghar
5	Name of Hospital to which he / she was removed		K.E.M Hospital ,Mmbai
6	Number of vehicles and type of the vehicle.		CT-100 Honda Motorcycle MH04 LN5134
7	Name and address of the Driver of the vehicle with particulers 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.		Sanjay Dharma Bhoir age-28 yrs.At-Lohape Tal.Wada Dist-Palghar
8	Name and address of the Owner of the vehicle as it stands on the date of the accident		
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company.		Insurance-201240040222701125400000
10	Number of Insurance Policy /Insurance Certificate and the Date of Validity of the insurance Policy / Insurance Certificate.		valid on 24-02-2028
11	Action taken, if any. And the result there of.		COURT PENDING
			Inspector of Police.
			GANESHPURI .Police Station

N.B – This form should accompany with all the necessary documents (1) F.I.R (2) Pañchanama (3) Medical Certificate/Post –Mortem Report