

FORM COMP.AA**(see rules 253,253(C),(iii),254(80),255(I)(iv))****REPORT ABOUT THE MOTAR VEHICLES ACCIDENT**

1	Name of the Police Station	Kinhvali police station
2	CR.No./TAR/SDE NO.	CR.No. 28/2025,BNS 106, 125(A), 125(B), 281 WITH Mv act 184
3	Date,time & Place of accident	Date 26/02/2025 Time- 17.00 Place Dolkham-Sakhurli road, on the next bend of Post Basic Ashram School, Dolkham and village, Tal Shahapur, Dist. Thane
4	Name of injured/ <u>Deceased</u> /DEAD	1) Keshav Tukaram Varkute age 30 yrs at- Nibhalpada post- Tebhurli tal- shahapur dist- thane 2) Barku Ananta Bhagat age 45 yrs at-Ranvhir, post-Dolkhamb Tal-Shahapur Dist-Thane
5	Name of the Hospital to wichHe/She was removed	SUB-District hospital Shahapur Tal Shahapur, Dist. Thane
6	Number of Vehicle & type of vehicle	1) MH 04 KV 1682 (MOTORCYCLE)
&7	Name & address of the driver of the vehicle with particulars of driving license of the said and the address of the Issuing Authority of this said Driving license. The number of Badge in case of public vehicle & the address of the Issuing Authority of the said Badge	1) Barku Ananta Bhagat age 45 yrs at-Ranvhir, post-Dolkhamb Tal-Shahapur Dist-Thane (Licence NOT Found)
8	Name & address of the Owner of the vehicle as it Stands on the date of the accident	Sakharam Ananta Bhagat age 47 yrs at-Ranvhir, post-Dolkhamb Tal-Shahapur Dist-Thane
9	Name & addres of the Insurance company with whom the vehicle was insurance & the Divisional office of the said Insurance company	--
10	Number of insurance policy / insurance certificate and the date of validity of the insurance policy / insurance certificate	
11	Action taken,if any & result of	Abet summury
		Ass.Inspector of Police
		Kinhavali police Station
		Thane rural
	N.B-This form should accompany with all the necessary documents (I) FIR (2) Panchanama (3) Medical certificate/postmortem report	

