

FORM COMP AA
(See Rules 253(C), 234(5)(iii), 254(2), 255(1)(Xiv))
REPORT ABOUT THE MOTER VEHICLES ACCIDENTS

1	Name of the Police Station	SHAHAPUR POLICE STATION
2	Cr/No. Tar/ No. SEC No	I - 376/24 BNS 106(1), 125(a), 125(b) MV ACT 187,132 (i)(a),133,134
3	Date, time and place of the accident	Date 29/12/2024 time- 06.50 pm Nashik-Mumbai Highway Road, Cherpoli Traffic Chowk
4	Name of the Injured / deceased	DEAD- Lallu Bhagwandin Sahu Add-house no.229,ward no.15, amin, satna, madhya pradesh
5	Name of the Hospital to which he / she was removed	SUB-District Hospital, Shahapur
6	Number of Vehicle and the types of the vehicle	Accused Vehicle- TOYOTA KIRLOSKAR MOTOR PVT LTD CAR MH15AK4888
7	Name and address of the driver of the vehicle with particulars of: driving license of the said driver driver and the address of the issuing Authority of the said Driving License, the number of the Badge in case of Public Service Vehicle and the address of the issuing Authority of the said Badge?	Accused Vehicle Driver - Ramchandra Abaji Avhad Add- Room No. 7, Indira Nagar, Tilak Nagar, Road No. 3, Chembur W, Greater Mumbai,mumbai Suburban Accused Driving License- MH0319970016622
8	Name and Address of the Owner of the Vehicle as it stand on: the date of the accident?	Accused Vehicle- TOYOTA KIRLOSKAR MOTOR PVT LTD CAR MH15AK4888 Owner Name- Ramchandra Abaji Avhad Add- Room No. 7, Indira Nagar, Tilak Nagar, Road No. 3, Chembur W, Greater Mumbai,mumbai Suburban
9	Name and address of the Insurance company with whom the : Vehicle was insured and the Divisional office of the said Insurance Company?	SBI General Insurance Company Ltd
10	No. of Insurance Policy Insurance Certificate and the date of the : Validity of the Insurance policy/ Insurance certificate.	POPMCAR00100927429 Validity Date- 14-Aug-2025
11	Action taken, if any, and the result thereof	Chargesheet Submit

DATE- 29/01/2025


INSPECTOR OF POLICE
SHAHAPUR POLICE STATION

NB : This Form should accompany with all the necessary document viz (1) FIR (2) Panchnama, (3) Medical Certificate / Post Mortum Report.