FORM-COMP.AA

(See Rues 253(C), 234(5) (Iii) 254 (2) 255(I) (Iv)

REPORT ABOUT THE MOTOR VEHICLE ACCIDENTS

01	Name Of Police Station	पोलीस स्टेशन मालेगाव
02	Cr.No./Tar No/Sde No	211/2026 कलम 125(अ), 281 भा.न्यां.सं. सहकलम 184 मो. वा. का.
03	Date Time And Pace Of The Accident	06/03/2025 चे 14.35 वाजता
04	Name Of The Injured/Deceased	मोहम्मंद अश्फाक शेख हमजा वय 50 वर्षे रा अकोला फाटा मालेगाव
05	Name Of Hospital To Which He/She Was Removed	युनिटी मल्टीस्पेशालिस्ट हॉस्पीटल अकोला
06	Number Of Vehices And Type Of Vehicle	मोटरसायकल क्रमांक बजाज पल्सर एम.एच.37 एएल 8353 चा चालक
07	Name and address of the Driver of the vehicle with particulars 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	मोटरसायकल क्रमांक बजाज पल्सर एम.एच.37 एएल 8353 चालक दिपक नामदेव अवचार वय 46 वर्षे रा डही ता.मालेगाव जि.वाशिम
08	Name and the address of the owner of the vehicle as it sends on the date of the accident	मोटरसायकल क्रमांक बजाज पल्सर एम.एच.37 एएल 8353 चालक दिपक नामदेव अवचार वय 46 वर्षे रा डही ता.मालेगाव जि.वाशिम
09	Name and address of the insurance company with whom the vehicle was insured and the divisional officer of the said insurance Company	बजाज फायनान्स क्रेटीड लि.मी
10	Number of Insurance Police/Insurance certificate and the date of validity of the insurance Police/Insurance certificate	--
11	Action taken if any and the result thereof	कलम 125(अ), 281 भा.न्यां.सं. सहकलम 184 मो. वा. का. प्रमाणे गुन्हा दाखल
12	In charge of Police Station	

(किशोर चिंचोळकर)
पोहवा/०९
पो.स्टे.मालेगांव,जि.वाशिम.

Signature and Stamp
of the Police Inspector

पोलीस निरीक्षक
पो.स्टे.मालेगाव जि.वाशिम

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