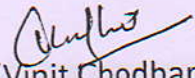


## FORM COMP AA

See Rules 253(e), (3), 254(l)(4)

## ABOUT THE MOTAR VEHICLES ACCIDENTS

1.	Name of the Police Station	Ratnagiri Police Station
2.	CR. NO./TAR No./SDE No.	32/2017
3.	Date Time and Place of accident	Nachne Road Near ITI at 20.00 on 01/04/2017
4.	Name of the Injured/Deceased	Anant Ramchandra Gurav
5.	Name of Hospital to Which he/she was removed	Civil Hospital Ratnagiri
6.	Number of Vehicle and type of the vehicle	Tow Wheeler no. MH/08/AL/0804
7.	Name and address of the Driver of the vehicle with particular or Driving License of the said Driver and the address the Issuing Authority of the said Driving Licence. The number of Badge in case of Public Service Vehicle and the address of the issuing Authority or the Badge	Anant Ramchandra Gurav, Add. At. Post Aashti GuravWadi Tal. Khed, Dist. Ratnagiri <b>RTO Ratnagiri</b> <b>MH08528206</b>
8.	Name and address of Owner of the Vehicle as it stands on the date of the accident	Chetan Prakash Navrange, Add. Bander Road Savitri Bhavan, Near Fhadke Udyan , Tal. Dist. Ratnagiri
9.	Name and address of Insurance Company With whom the vehicle was insured and the Divisional Office of the said Insurance Company	New India Insurance Pvt. Ltd. Javkar Plaza Jay Sthambh Tal. Dist. Ratnagiri
10.	Number of Insurance Policy/ Insurance Certificate and Date of Validity of the Insurance Policy/ Insurance Certificate	16160231201717126 12/02/2018
		 (Vinit Chodhari) Inspector of Police Ratnagiri City Police Station
N.B. – This Form should accompany with all the necessary document viz. (1) F.I.R. (2) Panchanama(3) Medical Certificate /Post-Mortem Report		