

**Form comp AA**  
**Sec Rules 253(c)(iii), 254, (80,255(1)(iv))**  
**Report about the motor vehicles accident**

1	Name of the police station	:-	Kheda police station
2	CR.NO./TAR NO./SDE	:-	Apghat No. 86/2017
3	Date Time and place of accident	:-	1/09/2017 – 19.00 On Mumbai Goa Highway (Kashedi Ghat)
4	Name of the injured/Deceased	:-	Nil
5	Name of the hospital to which he/she was removed	:-	Nil
6	Number of vehicles and type of vehicle	:-	Swift car No. MH 04/FF/4131
7	Name and address of the Driver of the vehicle with particular or Driving License Authority 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 said Badge	:-	Bulding No. T/29 Pratiksha Nagar sion koliwada Mumai No. 22 Lince No. MH01-200900660 Issuing Authority – MH01 2015268
8	Name and address of the Owner of the vehicle as it stand on the date of the accident	:-	PRASHANT PARSHURAM PHADKE SANKALP SIDDHU CO OP HSG SOC Pratiksha Nagar sion koliwada Mumai No. 22
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office the said Insurance Company	:-	IFFCO – TOKIO GENERAL INSURANCE CO. LTD 108 1 <sup>ST</sup> FLOOR MONARCH PLAZA. SECTOR 11 NEAR K- STAR, CBD BELAPUR NAVI MUMBAI MAHARASHDRA.
10	Number of Insurance Policy Insurance Certificate and Date of validity of the insurance Policy /Insurance Certificate	:-	1-C471NTB P400 Policy # 50812797 Date- 25/02/2017 00:00:00 To 24/02/2018 23:59:59

11	Action taken if any and result there of	:-	Motor vehicle Register No 83/2017 MV ACT184 Date On 4/09/2017 S.C.C. No. 289/2017 Fine 2000/ Rs.
			Inspector of Police <b>पॉलिस निरीक्षक</b> Khed police Station <b>खेड पोलीस ठाणे, जि. लातूर</b>
NB – This form, should accompany with all the necessary document viz (1) FIR (2)Panchanama (3)Medical Certificat/ Post – Mortem Report			

10	Insurance Certificate	Number of Insurance Policy Insurance Certificate and Date of validity of the	1-CA21NB P400 Policy # 5081177 Date- 25/01/2017 00:00:00 To 24/03/2018 23:59:59
9	Company	Divisional Office the insured and the vehicle was the company with whom the insurance	LCFCO - TQNO GENERAL INSURANCE CO. LTD 108 Y FLOOR MONARCH PLAZA, SECTOR 11 NEAR K-STAR, CBD BELAPUR HAVALI MUMBAI MAHARASHTRA.
8	Badge	Name and address of the Owner of the vehicle as it stand on the date of the accident	PRAASHANT PARSHURAM PHADKE SANKAR SIDDHU CO OP HSG SOC Pratiksha Nagar zone Kotwada Mumbai No. 23
7	Authority of the said	Authority of the said Owner and the address at 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 said	Issuing Authority – MH01 201528 Licence No. MH01-20090880 23 Building No. 7/29 Pratiksha Nagar zone Kotwada Mumbai No.
6	Authority of the said	Authority of the said Owner and the address at 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 said	
5	Authority of the said	Authority of the said Owner and the address at 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 said	
4	Authority of the said	Authority of the said Owner and the address at 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 said	
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2	Authority of the said	Authority of the said Owner and the address at 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 said	
1	Authority of the said	Authority of the said Owner and the address at 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 said	