FORM COMP AA See Rules 253]254©(iii)254(1)(iv) REPORT ABOUT YHE MOTAR VHICLES ACCIDENTS Name of the police station **Dodamarg** Cr no-67/2017 CR no /tar no/sde no 2 13/6/2017 ,22.30 Vazre Date, time and place of the accident 3 dodamarg Bharat Krishna jadhv r/o Name of the injured/Deceased 4 aayee dodamarg Rural hospital dodamarg. Name of the hospital to which he/she 5 was removed 1) KA-22-B-9598 ASHOK Number of vehicles and type of the 6 Layland dost limited vehicle 2) Mh-07E-7900 Hirohonda motar cycle 1) Pravin kumar Name and address of the driver of the 7 bhramagawda patil vehicle with particulars or driving tal-hukeri distlicense of the said driver ad the address of the issuing Authority of the said Belgum statedriving license.the number of badge in Karnataka. case of public service vehical and the Lc no-ka23-20030001065 address of the issuing Authority of the 2) Bharat Krishna jadhv said Badge. r/o -aayee dodamarg. Larning Ic no-LL/3274/2015. Gopal bassappa pagad r/o Name and address of the woner of the 8. konankeri tal-belgum dist vehicalas it stands on the date of the belgum accident. Royal sundram ganral Name ad address of the insurance

insurance co op limited.

9.

company with whom the vehical was

ir	nsured aand the Divisional office of the aid insurance company.	
220	Mumber of insurance policy /insurance certificate and the date of validity of the insurance policy/insurance certificate.	 1) Bharat Krishna jadhav- Larning Ic no-LL/3274/2015. 2) Pravin kumar bhramagawda patil Lc no-ka23- 20030001065
	Action taken if any and the result	Dodamarg police station FIR NO-67/2017
11.	thercof.	FIR NO 0.7
	Inspect Dodamarg . This form should accompany with all the necessary dical certifate/post-mortem report.	tor of police spolice station document viz(1)F.I.R.(2) panchanama (