## **FORM COMP AA**

[ See Rules 253 (C), 254 (c)(iii), 254 (80 255(1)(iv) ]
REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

1	Name of the Police Station	Kankavali Police Station
2	CR.NO./TAR No./SDE No.	Cr.No.60/2023 IPC 304(A), 279,337,338, MV Act- 184
3	Date, Time and Place of the accident	Date- 05.03.2023, Time- 20.20 At- Kankavali, Tal- Kankavali, Op. Hotel Kinara, NH-66 Mumbai-Goa Highway service road
4	Name Of the Injured/Deceased	Deceased- 1) Kirti Kashiram Sawant Age-45 Years, At- Kankavali Bijalinagar tal-Kankavali Injured- 1) Swara Vijay Sawant Age-12 Years, At- Kankavali Bijalinagar Tal-Kankavali
5	Name of Hospital to which he/she was removed	Sub District Hospital Kankavali
6	Number Of Vehicles and type of the vehicles	1 Motar Car No.RJ 02 CF 5244
7	Name and address of the Driver of the vehicle with particulars or Driving License of the saod driver and the address of the issuing authority of the said Driving License. The number of Badge in case of Public Service Vihicle and the address of the Issuing Authority Of the said Badge	Driver Name- Vikram Chhittarmal Kumar Age-32 Years, At Basai, Jogiyan, State-Rajastan  Driving License NO. MH 0720210004254  RTO Sindhudurg
8	Name and address of the Owner of vehicle as it stands on the date of the accident.	Vikram Chhittarmal Kumar Age-32 Years, At Basai, Jogiyan, State-Rajastan
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional office of the said Insurance Company	Cholamandal Ms Ganral Insurance Company Ltd
10	Number of Insurance Policy/Insurance Certificate and the Date of Validity of the insurance Policy/Insurance Certificate.	1 Validity- 28.12.2020 to 27.12.2023

11	Action taken,, if any, and the result there of	Cr.No.60/2023 IPC 304(A), 279,337,338, MV Act- 184
		Inspecter of Police
		Kankavali Police Station

N.B- This form should accompany with all the necessary document viz (1) FIR, (2) Panchnama, (3) Medical certificate/Post Mortem Report