FROM COMP AA

[Sce Rules 253,254©(iii),254(80 255(1)(iv)]

REPORT ABOUT THEMOTAR VEHICLES ACCIDENTS

		1					
१	Name of the police station	:-	baramati city				
२	CR.No/TAR No/SDE No	:-	719/2021 IPC 279,337,338, mvact 184				
w	Date Time and place of the Accident		Dt-11/12/2021 AT 22/38 PM IN BHIGVAN ROAD BAJUKADE JANARE ROADVAR RINGROAD BARAMATI				
8	Name of the Injured/Deceased	:-	SUJIT LAKSHUMAN GAIKWAD AGE 29 AP PATAS ROAD BARAMATI AL BARAMATI DIST PUNE				
ч	Name of the Hospital to Which he/she Was Removed	:-	NIL-				
	Number of vehicles and type of the vehicle	:-	1] HONDA UNI KORN MOTVAR SAYKAL NO MH 42 AW 6123 2] UNKNOWN				
y	Name and address of the Driver of the vaehicle With praticules or driving license of the side driver and address of the Issuing Authority of the side Driving license of the number of badge in case of publice service vehicle and the address of the Issuing Authority of the side Badge.	:-	UNKNOWN				
۷	Name and Address of the owner of the vehicle as it Stands on the date of Accident	:-	SUJIT LAKSHUMAN GAIKWAD AGE 29 AP PATAS ROAD BARAMATI AL BARAMATI DIST PUNE				
9	Name and Address of the Insuranse Company With Whom the vehicle Was insured and the DivisionL Office Of The said Insuranse Company	:-	NIL				
१०	Number Of insurance policy.insuranseCeritificate And date Of Validity of the Insuranse policy/insurance Certificate	:-	NIL				
११	Action Taken If any and the Result thre of	:-	NIL				
			Inspector Of police Baramati city police station				
N R	- this form should accompany with all the necessary document vi FIR nanchanama medical						

N.B- this form should accompany with all the necessary document vi, FIR, panchanama, medical certificate, post mortem Repot.