FROM COMP AA

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

certificate, post mortem Repot.

REPORT ABOUT THEMOTAR VEHICLES ACCIDENTS

१	Name of the police station	:-	baramati city					
२	CR.No/TAR No/SDE No	:-	800/20 21 279,337,338,MVACT 184 134					
3	Date Time and place of the Accident	:-	Dt- 26/12/2021 AT- 05/00 PM IN BARAMATI					
			NIRA ROADVAR PETROL PAMP BARAMATI DIST					
	N Cil I i 1/D		PUNE					
8	Name of the Injured/Deceased	:-	BASHIR ABDUL PATHAN AGE- 65 AP HOL					
ų	Name of the Hamital to Milials		BARAMATI TAL BARAMATI DIST PUNE					
٩	Name of the Hospital to Which he/she Was Removed	:-	NIL					
	Number of vehicles and type of the	:-	1] MOTAR SAYKAL NO- MH 12 BL 3267					
	vehicle		2] UNKNOWN					
G	Name and address of the Driver of the	:-	UNKNOWN					
	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							
٤	side Badge. Name and Address of the owner of the	:-	BASHIR ABDUL PATHAN AGE- 65 AP HOL					
C	vehicle as it Stands on the date of	:-	BARAMATI TAL BARAMATI DIST PUNE					
	Accident		BARAINATI TAL BARAINATI DIST PONE					
9	Name and Address of the Insuranse	:-	NIL					
	Company With Whom the vehicle Was							
	insured and the DivisionL Office Of The							
	said Insuranse Company							
१०	Number Of insurance	:-	NIL					
	policy.insuranseCeritificate And date Of							
	Validity of the Insuranse							
११	Policy/insurance Certificate Action Taken If any and the Popult through	:-	NIL					
77	Action Taken If any and the Result thre of		INIL					
	UI .							
			Inspector Of police					
			Baramati city police station					
N.B-	N.B- this form should accompany with all the necessary document vi, FIR, panchanama, medical							