FROM COMP AA

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

REPORT ABOUT THEMOTAR VEHICLES ACCIDENTS

१	Name of the police station	:-	baramati city
२	CR.No/TAR No/SDE No	:-	02/2022 IPC 279, , 337,338 , MVACT 184,
3	Date Time and place of the Accident	:-	DT- 30/12/2021 AT 08/30 PM IN BARAMATI TE
			TINHATTI CHOWK BARAMATI DIST PUNE
8	Name of the /Deceased	:-	SURAJ SADASHIV KHANDARE AGE-21 AP BHOITE
			HOSPITAL NAJIK BARAMATI DIST PUNE MB-
ч	Name of the Hospital to Which	:-	NIL
	he/she Was Removed		
	Number of vehicles and type of the	:-	1] MH 42 AR 0568
	vehicle		2] MH 42AC 6551
6	Name and address of the Driver of the	:-	ATUL RAJESH SHILWANT AGE 26 AP-
	vaehicle With praticules or driving		GAUTAMNAGER TC COLLAGE NAJIK BARAMATI
	license of the side driver and address of		TAL BARAMATI
	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.		
۷	Name and Address of the owner of the	:-	SURAJ SADASHIV KHANDARE AGE-21 AP BHOITE
	vehicle as it Stands on the date of		HOSPITAL NAJIK BARAMATI DIST PUNE
	Accident		
9	Name and Address of the Insuranse	:-	
	Company With Whom the vehicle Was		
	insured and the DivisionL Office Of The		
9.0	said Insuranse Company		All
१०	Number Of insurance	:-	NIL
	policy.insuranseCeritificate And date Of Validity of the Insuranse		
११	policy/insurance Certificate Action Taken If any and the Result thre	:-	NIL
77	of		INIL
	01		
			Inspector Of police
			Baramati city police station
N D	 		account decoment of EID mancheness medical

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