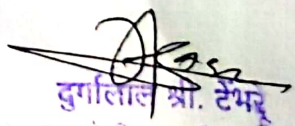


**FORM COMP. AA**  
(See Rules 253©(iii), 254(1), (iv))  
**REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS**

1	Name of The Police Station	÷	पांढरकवडा जि. यवतमाळ
2	CR NO-/TAR NO/SDE NO	÷	585/2019 कलम 279, 304(अ) भादवी
3	Date, Time and place of the accident	÷	दिनांक 13/06/2019 रोजी चे 11/00 वा. मारेगाव वन गावाजवळ डांबरी रोडवर
4	Name of the deceased	÷	मृतक कांताबाई देवीदास मानकर वय 45 वर्ष रा.कोळपाखींडी ता. झरी (जामनी)
5	Name of Hospital to which he/she removed	÷	उपजिल्हा रुग्णा. पांढरकवडा व शासकीय रुग्णालय यवतमाळ
6	No. of vehicles & type of the vehicle	÷	मो.सा.क्रमांक एम.एच.29/वाय/7340
7	Name and address of the driver of the vehicle with particulars or driving license of the said driver and address of the issuing authority of the said driving license the number of badge in case of public service vehicle and address of the issuing authority of the badge	÷	राहुल देवीदास मानकर वय 26 वर्ष रा.कोळपाखींडी ता. झरी (जामनी)  मो.सा. चे लायसन्स नाह
8	Name and address of the owner of the vehicle as it stands on the date of the accident	÷	राजु मोहण मोहीतकर वय 35 वर्ष रा.झरी (जामनी) ता. झरीजामर्न
9	Name and address of the insurance company with whom the vehicle was insured and divisional office of the said insurance company	÷	विमा नाही
10	Number of the insurance policy / insurance certificate and the date of validity of the insurance policy/ insurance certificate	÷	नाही
11	Action taken, if any and Result there of	÷	दोषारोपपत्र दाखल केले.

  
दुर्गालि. श्री. टेभर  
स. पोलीस उपनिरीक्षक  
पोलीस स्टेशन.....