FORM COMO AA

{ see rules 253(c) 254(c) (iii) 254(80 255(1)(iv)}

	REPORT ABOUT THE MOTAR \	/EHICLES ACCIDENTS	
1	Name of the police station		
2	CR NO/TAR/SDE no	232 2020 sec 279, 337 FPC	01
		24212020 Date 241/0/2020/17/00 Boton/ to savate	kose
3	Date, time and place of the accident	July 2 loss Atram	
4	name of the injured	1) say, paikabal Jadazao Atram	
		are 38 years. AT. Medhani	
		To mareston Dist. yoratmal.	
		the sailment	"
5	Namae of the hospital to which he/she	chintement HOS Yavetment	
_	was removed		
6	Name of the vehicals and type of the vehicals	MH129/BD 0230 PIAGGIO APE.	
7	Name and address of the driver of the		
1	vechicles with pariculer on driving	Rahul Suzesh Khizatakaz.	
	license of the said driver and the	age 23 year, AT, SAKAA	
	address of the issuing authourty of the	Ta. makegaon gist. yaratmal.	
	said driving license the number of badge	License No	
	in case of publice service and the address of the issuing of the said badge		
-8	Name and address of the owner of the		-
	vehicles as it stand on the on the date of	Rahul. Suzesh Khisatakal. ASE	Phesa
	the accidents	The sasoful to make san	11
9	Name and address of the insure	YELOCITY INSURANCE BROKE	NG.
	company with whoim the vehicle was	SERVICES DYT LIMITED	
	insured and the divisional office of the saiod insurance company	Agent. Broker. Licence code 434 Agent. Broker. Contact No. 3114166.	
	Salod insurance company	Avent. Rocker Control	
	4	12 12 12 12 12 12 12 12 12 12 12 12 12 1	40000
10	Number of insurance policy/ insurance	01/104/7-20	- James Land
	certificate and the date of validaty of	01610467880000 railid 13/7/20	21
	the insurance certificate		
11	Action taken if any and the result	Police Investigation 40170	4
	thereof	Palendra Chandekar, p.s. Mazekam arch	1-1704

NB This form should accompagny with all the necessary documents viz (1) FIR (2)

Pnchanama (3) Medical certificate/post mortarm Report

म् त्राक्ष चीटक