

**FORM COMP AA**  
**[ SEE RULE 253 [C] (III) 254 (80255(1) (IV))**  
**REPORT ABOUT MOTOR VEHICLES ACCIDENTS**

	Name of the police station	police station bhadravati dist . chandrapur
2	Cr no.	554/21 sec. 283, 304 (a) ipc
3	Date time and place of the accident	date. 22/12/2021 time 20.15/20.30 place – ghodpeth bus stop 8 ki mi east
4	Name of the injured / deceased	died person – ramchandra Gajanan pimpalkar age- 32 year at – gunjala, tah. Bhadravati dist – chandrapur
5	Name of hospital to which he / she was removed	rural hospital bhadravati
6	Number of vehicle and type of the vehicle	died person vehicle – MH-34/AC/2902 (BIKE) Accuse vehicle – MH-12/LT-3167 (TRUCK)
7	Name and address of the Driver of the vehicle with particulars or Driving licence of the said driver and the address of the issuing authority of the said driving license. The number of badge in case of public service vehicle and the address of the issuing authority of the said badge.	Accuse truck driver – pancham Prasad gaud age 38 year at ramai nagar chandrapur DL no. UP62 20020003742 valid till – 25/8/22
8	Name and address of the Owner of the vehicle as it stands on the date of the accident.	mohammad ajaj mohammad hanif sheikh age 38 year at – near om bhavan Nagpur road, chandrapur
9	Name and address of the insurance company with whom the vehicle was insured and the divisional office of the said insurance company.	icici Lombard company, veer savarkar marg , near siddhi vinayak temple main gate, prabhadevi, Mumbai
10	Number of insurance policy/ insurance certificate and the date of validity of the insurance policy/ insurance certificate.	invoice number 227394006 till – 25 september 2022
11	Action taken, if any and the result thereof.	accuse arrest

  
**पोलिस निरीक्षक**

  
**गजानन तेलसांधे**  
**पोलीस उपनिरीक्षक**  
**पो.स्ट. भद्रावती**