

FORM COMP AA

[See Rules 253 (c),254(c)(iii), 254 (80),255(1)(iv)]
REPORT ABOUT THE MOTAR VEHICLES ACCIDENTS

01	Name of the Police Station	Jodbhavipeth police station, solapur city
02	CR.NO/TAR NO./SDE NO.	CR.NO. 329/2017 U/S IPC 279,337,338 R/W M.V ACT 134 (A)(B)/177,184
03	Date, Time and place of the accident	30/06/2017 AT 12.30 Rajlaxmi factory, Hipparga road, Tuljapur-solapur road, solapur
04	Name of the Injured/Deceased	Injured-1. Sunil kedari holi age-27 yrs 2. sudhakar shivaji tumari age- 22 yrs 3. rama omani sutar age- 50 yrs R/O kakati tal/dist-belgaon
05	Name Of Hospital to Which he/she was removed	CIVIL HOSPITAL, SOLAPUR
06	Number of vehicles and type of the vehicle	EICHER TEMPO No. KA-22/C-0290 TRUK NO. MP-09/HH-1180
07	Name and address of the Driver of the said Driver and the address of 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	Jitendrasingh sureshsingh solanki age-21 Adress- A/P simrol, tal- Mehtpur dis- ujjain (state- Madhya Pradesh) Driving license no. MP-13N2016-0344925 Issued by R.T.O. UJJAIN (state- Madhya Pradesh)
08	Name and address of the Owner of the vehicle as it stands on the date of the date of the accident	Jaypalsing Tomar R/O- 198 B , Swath Nagar, Indore (state- Madhya Pradesh)
09	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company	Royal Sundaram general insurance company limited. Reg. office- Visharanthi Melaram Towers, no. 2/319, Rajiv Gandhi salai, karapakkam, chennai
10	Number of Insurance Policy/Insurance certificate and the Date of Validity of the insurance Policy/Insurance Certificate	Policy/Insurance certificate no. TAQ1018302 Validity - 14/03/2017 to 13/03/2018.
11	Action taken, if any and the result thereof	FIR is registered against accuse.

Inspector of police
Jodbhavipeth police station
Solapur city