

FORM COMP AA

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

1	Name of the Police Station	:-	Vijapur Naka Police Station, Solapur City
2	Cr. No./ TAR No./ SDE No.	:-	374/17 U/s 279, 337, 338 IPC 184/177 MVA
3	Date, Time and Place of the accident	:-	22/06/2017 16.15 In Front of SRPF Gate no.1, Soregaon, Solapur
4	Name of the Injured/ Deceased	:-	Devendra Keshav Pradhan M 50yrs R/o- Koyana Building, 1/97, SRPF Camp, Soregaon, Solapur
5	Name of Hospital to which he/ she was removed	:-	Ashwini Hospital Solapur
6	Number of vehicles and type of the vehicle	:-	1) Car No. KA 28 P 3652 (Accused Vehi) 2) Auto Rikshwa MH 13 J 9349
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 Licence. The number of Badge in case of Public Service Vehicle and the address of the Issuing Authority of the said Badge	:-	Chandrakant Revappa Karaki M 39yrs R/o- at post- Chikbevnur Tal- Indi Dist- Vijapur State- Karnataka Dri. Lic. No. 1714/989 RTO, Vijapur State- Karnataka
8	Name and address of the Owner of the vehicle as it stands on the date of the accident	:-	Chandrakant Revappa Karaki M 39yrs R/o- at post- Chikbevnur Tal- Indi Dist- Vijapur State- Karnataka
9	Name and address of the Insurance Company with whom the vehicle was insured and the Divisional Office of the said Insurance Company	:-	National Insurance Company Ltd. Sevundarabad DO IV, First floor, Minerva complex, Secundarabad 500 003
10	Number of Insurance Policy/ Insurance Certificate and the Date of Validity of the insurance Policy/ Insurance Certificate	:-	55270031166160155282 31/01/2017 to 30/01/2018
11	Action taken, if any, and the result thereof	:-	Chargesheet submitted against the accused
			Inspector of Police, Vijapur Naka Police Station, Solapur City