

**FORM COMP AA**  
(sec Rules 253 (c), 254 (c) (iii), 254 (80 255 (1) (iv))  
**REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS**

1	Name of the Police Station	Bhokar dist.Nanded
2	CR.NO./TAR No./SDE No.	408/2023 U/S 279, 304(a) of I.P.C
3	Date, Time and Place of the accident.	30/11/2023 at 21.00 hrs Bhokar to Kinwat road near Therban Tq.Bhokar dist. Nanded.
4	Name of the Injured / Deceased	1)Shankar Apparao Rathod age 64 year 2)Lakhan Shankar Rathod age 27 year both r/o Kuncheli tanda Tq. Naigoan dist. Nanded
5	Name of Hospital to Which he/she was removed	Govt Hospital Bhokar
6	Number of vehicles and type of the vehicle	T S-09 UD 4046 Jeep
7	Name and address of the Driver of the vehicle with particulars or Driving License 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.	Dyaneshwar Nilba Fule age 36 year r/o Janta colony Gopal chowadi cidco Nanded tq. Dist. Nanded  MH 26 20080003013 RTO Nanded
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Tapankumar Ramdas Dupare age 45 years r/o Nilgiri Housing Sociaty Taroda Nanded Tq. dist. Nanded
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said insurance Company.	GO DIGIT General isurance comp.
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	D074174163/24112022  24/11/2023
11	Action taken if any and the result there of	An offence has been registered against the accused. After completion of investigation Charge-sheet has been submitted.

Inspector of Police  
Police Station Bhokar  
Dist. Nanded (M.S)



जबाब

दिनांक 03/12/2023

मी लक्ष्मीबाई शंकर राठोड वय 49 वर्षे व्यवसाय ईसतोड कामगार व मजुरी रा. कुंचेली तांडा ता. नायगाव जि. नांदेड मो.क्र. 6301520256

समक्ष पोलीस स्टेशन भोकर येथे हजर येवुन जबाब लिहून घेण्यास सांगते की, मी वरील ठिकाणची राहणारी असुन मला तिन मुले असे अपत्य असुन मागील चार वर्षांपूर्वी माझा दोन नंबरचा मुलगा कैलास शंकर राठोड हा अपघाता मध्ये मरण पावला होता. माझा लहान मुलगा लखन व माझे पती असे आम्ही मौजे आंदेगाव येथे ऊस तोडीचे कामास मागील पंधरा दिवसांपूर्वी आमच्या गावातुन पंधरा ते विस मानस ऊस तोडीचे कामास डॉ. शंकरराव चव्हाण कारखाना वाघलवाडा यांचे अधिपत्याखाली मौजे आंदेगाव येथे ऊस तोडीचे कामकाज करुन कुटुंबाचा उदर निर्वाह करतो.

दिनांक 30/11/2023 रोजी दुपारी 3.00 वाजताचे सुमारास माझे पती शंकर आप्पाराव राठोड यांची तब्येत ठिक नसल्याने मुलगा लखन शंकर राठोड याने त्याचे कडील मोटार सायकल स्लॅंडर जिचा क्र MH 26 CC 1330 ने विलाजाकामी भोकर येथे दवाखान्यात दाखविण्या करीता आले होते. दवाखाना करुन परत आंदेगावकडे येत असतांना भोकर ते हिमायतनगर जाणारे सार्वजनिक रोडवर मौजे थेखन शिवारातील सुया नदी पुलाजवळ आले असतांना वेळ सायकाळी अंदाजे 7.30 वाजताचे सुमारास समोरुन एक टाटा कंपनीची जिप जिचा क्रमांक TS 09 UD 4046 च्या चालकाने त्याचे ताब्यातील वाहन हयगई व निष्काळजीपणे भरधाव वेगात येवुन माझा मुलगा चालवित असलेल्या मोटार सायकलला समोरुन जोराची धडक दिल्याने त्यांना माझे पती व मुलगा हे गंभीर जखमी झाल्याने त्यांना उपचार कामी ग्रामीण रुग्णालय भोकर येथे शरीक केले असता तेथील डॉक्टरांनी त्यांना तपासुन मयत झाल्याचे घोषित केले तशी माहिती आम्हाला लोकाळोकी समजल्याने आम्ही ग्रामीण रुग्णालय भोकर येथे येवुन पाहिले असता माझे पती व मुलगा मयत अवस्थेत दिसले. नंतर डॉक्टरांनी पोलीस स्टेशन भोकर येथे माहिती दिल्याने तेथील पोलीसांनी माझे पतीचे व मुलाचे प्रेतावर पंचनामा करुन डॉक्टरांना पत्रक दिल्याने तेथील डॉक्टरांनी पि एम करुन प्रेत माझा मुलगा रमेश दासु राठोड याचे ताब्यात दिल्याने आम्ही मुळ गावी येवुन पतीचे व मुलाचे प्रेतावर पंचनामा करुन रितीरिवाजाप्रमाणे अंत्यविधी केले.

दिनांक-03/12/23

वेळ-17.49

या CCTNS

10-16 वर

मुरम-408/23

पमम-279,

304-A

भ्या.द. की

अभि वारवम

कृष्ण मा.

पो.नि. शा.हे.व

पं.चे आदेशाने पो.ड.प.नि

केशव राठोड सा.हे.व

आंचे कडे लयास कामी

दिनांक

तरी यातील टाटा कंपनीचा क्र. TS 09 UD 4046 चा चालकाने त्याचे ताब्यातील वाहन हयगई व निष्काळजीपणे भरधाव वेगात वाहन चालवुन माझे पतीचे व मुलाचे मोटार सायकलला समोरुन जोराची धडक दिल्याने त्यात ते गंभीर जखमी झाल्याने त्यांना उपचाराकामी ग्रामीण रुग्णालय भोकर येथे शरीक केले असता ते दिनांक 30/11/2023 रोजी रात्री 9.00 वाजता सुमारास मरण पावले आहेत. त्याचे मरणास करील टाटा कंपनीचा क्र. TS 09 UD 4046 चा चालक कारणीभूत ठरला आहे त्याचेवर योग्य ती कार्यवाही होणेस विनंती आहे. आम्ही दुखात असल्याने आज रोजी पोलीस स्टेशनला येवुन वरील प्रमाणे तक्रार देत आहे.

माझा वरील प्रमाणे दिलेला जबाब माझे सांगणे प्रमाणे संगणकावर टॅक्निलिखित केला ही मला यातुन दाखविला माझे सांगणे प्रमाणे बरोबर व खरा आहे.

समक्ष

समक्ष

पोलिस ठाण अमलदार  
पोलिस ठाण भाकर

हा जबाब दिला सही:-



पोलिस ठाण अमलदार











८. घटनेच्या जागेचे वर्णन (पुढे चालू) :-

आम्ही मुहगावी येथील पत्तये व पुलाचे कामे संपन्नाने डिप्टीरिवाज, पुणेचे प्रांतविधी, के.के. वगेरे सायकल बरणास्थल वरवीने सदरचे बरणास्थल हे भोकर नै हिमामानगर को जाणारे सायकल E.C. रोड कोरा येथेच शिवाशिलीक सुद्धा नदी पुलावर विसर झडून सदर रोड हे गिरी सिमेंट कोरि मधे खणवलेले दिसत आहे. सदर रोडचा कोरि बाजल दिवाभंडार लावलेले दिसत आहे. सदर बरणास्थल वरु जपान डेप्यु मार्लव कोरिचे चिज वस्तु मिळून आले नाही.

सदर बरणास्थलाने न्युईर सिमा पाहत नि स्थालिक प्रकाश आहे.

- ① पूर्वेश :- सुद्धा नदीचे पात.
- ② पश्चिमेश :- सुद्धा नदीचे पात.
- ③ दक्षिणेश :- भोकर को येणारे सायकल E.C. रोड
- ④ उत्तरेश :- हिमामानगर को जाणारे सायकल E.C. रोड.

सदरचे बरणास्थल पचगांज आरु फ्यांसगळ पोलीसानी दिकता परिरक्षीत देका को बरणा व सदर आहे.

- ① प्राकार :- 19: 251786
- ② रेखांक :- 77: 694851







01/12/2023

Memorandum of a post-mortem examination held at

RH, Bhokar

Esary  
Hospital

on the dead body of

Shankar

Village

R/o Kuncheli

Apparao Rathod

City

Tanda, Naigao

64 yrs/male

District

Nanded

by

Dist. Nanded

Dr. Shreya P. Aaglawe

Taluka

Bhokar

I. General Particulars—

1. (a) By whom was the corpse sent?

PHC B.U. Jadhav

B.N. 2820, P.S. Bhokar

(b) Name of place from which sent.

R.H. Bhokar

(c) Distance of place from which sent.

2. By whom was the corpse brought?

Ramesh Dasu Rathod

35 yrs/male

R/o Kuncheli Tanda

Tal. Naigao, Dist. Nanded

3. By whom identified?

4. The date, hour and minute of its receipt.

30/11/23 at 8 pm

(a) The date, hour and minute of beginning post-mortem examination.

01/12/23 at 9.00 AM

(b) The date, hour and minute of ending post-mortem examination.

01/12/23 at 10.00 AM

5. Substance of accompanying Report from Police Officer or Magistrate, together with the date of death if known, supposed cause of death or reason for examination.

As per police inquest, the patient found dead at Thervan area, Sudhana and might have died on 30/11/23 at 7 pm. So brought at RH. Bhokar and post mortem is requested to know the exact cause of death.



8. If not examined at Dispensary or Hospital—

(a) Name of place where examined.

(b) Distance from Dispensary or Hospital.

(c) Reason why the body was not sent to the Dispensary or Hospital.

Not applicable

II. External Examination—

7. Sex, apparent age, race or caste.

64 yrs, male, Hindu by religion

Description of clothes and of ornaments on the body.

kamiz -Dhoti white colour.

8. Condition of the clothes— Whether wet with water, stained with blood or soiled with vomit or foecal matter.

stained with blood and soil.

9. Special marks on the skin such as scars, tattooing etc., any malformations peculiarities, or other marks of identification. State of the teeth.

Body duly identified by investigating officer, labelled, checked and verified

In newly born infants, the length and (if possible), the weight of the body to be recorded together with the state of the hair, nails and umbilical cord, its length, whether placenta is attached or not, if present, its size and condition.

Not applicable



10. **Condition of body**—  
Whether well-nourished, thin  
or emaciated, warm or cold.

Average built and nourished  
and cold body.

11. **Rigor Mortis**—Well-marked,  
slight or absent; whether  
present in the whole body or  
part only.

Rigor mortis is well marked  
in whole body.

12. **Extent and signs of decom-  
position, presence post-  
mortem lividity of buttocks,  
loins, back and thighs or any  
other part. Whether bullae  
present and the nature of  
their contained fluid.  
Condition of the cuticle.**

No signs of decomposition  
postmortem lividity developed  
on buttocks and posterior aspect  
of thighs and fixed.

13. **Features**—Whether natural  
or swollen, state of eyes,  
position of tongue: nature of  
fluid (if any) oozing from  
mouth, nostrils or ears.

Features are natural  
Eyes - partly opened, pupils dilated  
Mouth - partly opened  
Tongue inside the oral cavity  
No frothy oozing from mouth and  
nose

14. **Condition of skin**—Marks  
of blood etc. In suspected  
drowning the presence or  
absence of cuts, abrasions  
to be noted.

Dry skin



15. Injuries to external genitals.  
Indication of purging.

Intact, No injury  
No purging

16. Position of limbs—  
Especially of arms and  
of fingers in suspected  
drowning the presence or  
absence of sand or earth  
within the nails or on the  
skin of hands and feet.

Body is supine position and all  
limbs are straight.

17. Surface wounds and  
injuries—Their nature, posi-  
tion, dimensions (measured)  
and directions to be  
accurately stated their  
probable age and causes  
to be noted.

- 1) Right frontal region of head  
contused lacerated wound of size  
10x4x4 cm with skin hanging.
- 2) Left side of forehead abrasion  
is present of size 2x2 cm.

If bruises be present what is  
the condition of the  
subcutaneous tissues?

- 3) left leg tibia and fibula fracture  
is present which is open  
wound of size 8x5x4 cm  
contused lacerated wound.

(N.B.—(When injuries are  
numerous and cannot be  
mentioned within the space  
available they should be  
mentioned on a separate  
paper which should be  
signed).

18. Other injuries discovered by  
external examination or  
palpation as fractures etc.

yes all antemortem injuries

(a) Can you say definitely  
that the injuries shown  
against serial Nos. 17  
and 18 are antemortem  
injuries?



III. Internal Examination

19. Head—

- (i) Injuries under the scalp, their nature
- (ii) Skull—Vault and base—describe fractures, their sites, dimensions, directions, etc.
- (iii) Brain—The appearance of its coverings, size, weight and general condition of the organ itself and any abnormality found in its examination to be carefully noted (weight M. 3 grams · F. 2-7.5 grams).

contused lacerated wound is present over right frontal region of scalp size 10x4x4 cm with skin hanging on stripping of dura epidural, subdural hemorrhage with subdural haematoma present especially over frontal region of brain. subdural-hematoma of size 7x4 cm present

20. Thorax—

- (a) Walls, ribs, cartilages
- (b) Pleura
- (c) Larynx, Trachea and Bronchi.
- (d) Right Lung
- (e) Left Lung
- (f) Pericardium
- (g) Heart with weight
- (h) Large vessels
- (i) Additional remarks

- intact

- congested

- Airways patent, NO injuries present

Both lungs are mild edematous, intact

- Intact

- Intact

- Nil



21. Abdomen

Walls

Peritoneum

Cavity

Intact and congested

Buccal Cavity, teeth, tongue and Pharynx

Intact and congested

Esophagus

50 ml of semidigested food particles seen which can not be identified

Stomach and its contents

partly loaded with gases and faeces.

Small intestine and its contents

Large intestine and its contents

Liver (with weight) and gall bladder

congested and intact

Pancreas and Suprarenals

Spleen with weight

Kidneys with weight

Bladder

Organs of generations

Additional remarks with where possible, medical officer's deduction from the state of the contents of the stomach as to time of death and last meal.

State which viscera (if any) have been retained for chemical examination and also quote the numbers on the bottles containing the same.

Not preserved



Opinion as to the cause  
probable cause of death.

Death due to vital organ brain injury  
that is subdural haematoma with haemorrhagic  
shock due to road traffic accident.

viscera not preserved

Date: 01/12/2023.

*S. Anil Kumar*  
Dr. Shreya P. Anil Kumar  
Medical Officer  
Rural Hospital, Bhokar

The Spinal Cord need not be examined unless there are any indications of disease, Strychnia poisoning or injury.  
Note - The report must be written and signed immediately after the examination. Medical Officers must at once  
despatch a duplicate copy to the Civil Surgeon of their district for use in his office.  
Great care should be taken not to cut the viscera before they have been inspected *in situ*.



No.

20

Place Dispensary  
Civil Hospital

R. H. Bhakar

20

Forwarded to the Police Sub-Inspector P. S. Bhakar

for information with reference to his No. P.M. 01/54 of 01/12/2023

2. Viscera has been preserved. It may please be stated *Immediately* whether examination by the Chemical Analyser is necessary or it is to be destroyed.

Viscera not preserved

Shadane  
Dr. Shreyas P. Shadane  
Civil Surgeon or M.M.S. Officer,  
Rural Hospital, Bhokar

Copy forwarded with compliments to the Civil Surgeon,

for information.

M. M. S. Officer

Seen and examined by the Civil Surgeon,

on

20

Remarks of the Civil Surgeon,

(if any)

Civil Surgeon



01/12/2023

Memorandum of a post-mortem examination held at R.H. Bhokar Dispensary Hospital  
on the dead body of Lakhon Shankar of Village R/o Kuncheli Tanda,  
Rathod 27yrs/m City Naigao, Dist. Nanded  
Taluka Bhokar, District Nanded, by Dr. Shreya P. Aaglawe

I. General Particulars—

1. (a) By whom was the corpse sent? PHC B.U. Jadhav  
B.N. 2820, P.S. Bhokar
- (b) Name of place from which sent. } R.H. Bhokar
- (c) Distance of place from which sent. }
2. By whom was the corpse brought? } Ramesh Dasu Rathod  
35yrs / male, R/o Kuncheli Tanda  
Tal. Naigao, Dist. Nanded
3. By whom identified? }
4. The date, hour and minute of its receipt. 30/11/23 at 8pm
- (a) The date, hour and minute of beginning post-mortem examination. 01/12/23 at 10.00 Am
- (b) The date, hour and minute of ending post-mortem examination. 01/12/23 at 11.00 Am
5. Substance of accompanying Report from Police Officer or Magistrate, together with the date of death if known. Supposed cause of death or reason, for examination.  
As per police inquest, the patient found dead at Thervan area, sudhanandi and might have died due to RTA on 30/11/23 at 7pm. So brought at R.H. Bhokar and post mortem is requested to know the exact cause of death.



6. If not examined at Dispensary or Hospital—

(a) Name of place where examined.

(b) Distance from Dispensary or Hospital—

(c) Reason why the body was not sent to the Dispensary or Hospital.

Not applicable

II. External Examination—

7. Sex, apparent age, race or caste.

-27 yrs / male, Hindu by religion

Description of clothes and of ornaments on the body.

white pant shirt with chocolaty colour underwear-

8. Condition of the clothes— Whether wet with water, stained with blood or soiled with vomit or foecal matter.

stained with blood and soil.

9. Special marks on the skin such as scars, tattooing etc., any malformations peculiarities, or other marks of identification. State of the teeth.

In newly born infants, the length and (if possible), the weight of the body to be recorded together with the state of the hair, nails and umbilical cord, its length, whether placenta is attached or not, if present, its size and condition.



15. Injuries to external genitals.  
Indication of purging.

No injury

16. **Position of limbs**—  
Especially of arms and of fingers in suspected drowning the presence or absence of sand or earth within the nails or on the skin of hands and feet.

17. **Surface wounds and injuries**—Their nature, position, dimensions (measured) and directions to be accurately stated—their probable age and causes to be noted.

If bruises be present what is the condition of the subcutaneous tissues?

(N.B.—(When injuries are numerous and cannot be mentioned within the space available they should be mentioned on a separate paper which should be signed).

18. Other injuries discovered by external examination or palpation as fractures etc.

(a) Can you say definitely that the injuries shown against serial Nos. 17 and 18 are ante mortem injuries?

- 1) Contusion over right occipital region of scalp just above the ear of size 8x6 cm
- 2) Left wrist joint fracture
- 3) Left lower  $\frac{2}{3}$ rd of leg open wound with tibia fibula fracture of size 4x4x3 cm
- 4) Left foot dorsal surface crushed extensor muscles and tendons, open wound of size 6x3x3 cm with skin hanging
- 5) Right lower  $\frac{1}{3}$ rd of leg tibia fibula open fracture of size 2x2x2 cm.
- 6) Right middle  $\frac{1}{3}$ rd of leg contused lacerated wound of size 2x2x1 cm
- 7) Abrasion over right lumbar region of abdomen size 7x5 cm.



10. **Condition of body**—Whether well-nourished, thin or emaciated, warm or cold.

Average built and nourished  
Cold body

11. **Rigor Mortis**—Well-marked, slight or absent; whether present in the whole body or part only.

Rigor mortis well marked all over  
body.

12. **Extent and signs of decomposition, presence post-mortem lividity of buttocks, loins, back and thighs or any other part. Whether bullae present and the nature of their contained fluid: Condition of the cuticle.**

No signs of decomposition  
post-mortem lividity present on  
dependent parts of body.

13. **Features**—Whether natural or swollen, state of eyes, position of tongue: nature of fluid (if any) oozing from mouth, nostrils or ears.

Eyes closed  
mouth partly opened.  
Tongue inside oral cavity

14. **Condition of skin**—Marks of blood etc. In suspected drowning the presence or absence of cutis anserina to be noted.

Dry skin



**III. Internal Examination—**

**19. Head—**

- (i) Injuries under the scalp, their nature.
- (ii) **Skull**—Vault and base—describe fractures, their sites, dimensions, directions, etc.
- (iii) **Brain**—The appearance of its coverings, size, weight and general condition of the organ itself and any abnormality found in its examination to be carefully noted (weight M. 3 grams F. 2.75 grams).

Contusion over right occipital region of scalp of size 8x6 cm

On stripping of dural, epidural, subdural hemorrhage with subdural haematoma present especially over right occipital region of brain. subdural haematoma of size 6x4 cm

**20. Thorax—**

- (a) Walls, ribs, cartilages

fracture of left 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup>, 9<sup>th</sup> ribs at midclavicular line on left chest.

- (b) Pleura - congested

- (c) Larynx, Trachea and Bronchi.

- Intact and congested

- (d) Right Lung

Intact

- (e) Left Lung

Left lung lacerated at lower lobe in mid-clavicular line with bleeding seen.

- (f) Pericardium

- (g) Heart with weight

Heart had lacerated at the junction left ventricle and base of aorta with collection of blood.

- (h) Large vessels

- (i) Additional remarks.



21. **Abdomen—**

Walls

Peritoneum

Cavity

Buccal Cavity, teeth, tongue and Pharynx.

Esophagus

Stomach and its contents

Small intestine and its contents.

Large intestine and its contents.

Liver (with weight) and gall bladder.

Pancreas and Suprarenals

Spleen with weight

Kidneys with weight

Bladder

Organs of generations

Additional remarks with where possible, medical officer's deduction from the state of the contents of the stomach as to time of death and last meal.

State which viscera (if any) have been retained for chemical examination and also quote the numbers on the bottles containing the same.

Intact and congested

-100  
70 ml of semidigested food particles seen which can not be identified  
partly loaded with gases & faeces

congested and intact

- Not preserved



## 22. \*Spine and Spinal Cord—

Opinion as to the cause  
probable cause of death.

Death due to vital organ i.e. brain  
subdural haemorrhage with haematoma with  
haemorrhagic shock due to road traffic accident.

viscera not preserved

Dated 01/12/ 2023.

Medical Officer  
Rural Hospital, Bhokar

Dr. Shriya P. A. Aglawe  
Medical Officer  
Rural Hospital, Bhokar

\*The Spinal Cord need not be examined unless there are any indications of disease, Strychnine poisoning or injury.  
**Note**—The report must be written and signed immediately after the examination. Medical Officers will at once despatch a duplicate copy to the Civil Surgeon of their district for record in his office.  
Great care should be taken not to cut the viscera before they have been inspected *in situ*.



No.

200

Place Dispensary  
Civil Hospital

R.H. Bhokar

200

Forwarded to the Police Sub-Inspector P.S. Bhokar

for information with reference to his No. P.M. 02/55 of 01/12 2003.

2. Viscera has been preserved. It may please be stated **Immediately** whether examination by the Chemical Analyser is necessary or it is to be destroyed.

viscera not preserved

Medical Officer  
Rural Hospital, Bhokar

Shaglawe

Dr. Shreya P. Aglawe

Civil Surgeon or M. M. S. Officer

Copy forwarded with compliments to the Civil Surgeon,

for information.

M. M. S. Officer

Seen and examined by the Civil Surgeon,

200

on

Remarks of the Civil Surgeon,

(if any)

Civil Surgeon