

## 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	Police Station Kuntur
2	CR.NO./TAR No./SDE No.	138/2017 U/S 279,304(A) IPC
3	Date, Time and Place of the accident.	05/09/2017 at 21.30 hrs at Raher to Karegaon road near Yuvraj Dhaba
4	Name of the Injured / Deceased	Sanjay Mohanrao Kadam age 25 year R/o Dugaon Tq. Biloli
5	Name of Hospital to Which he/she was removed	Govt. Hospital Nanded
6	Number of vehicles and type of the vehicle	M.H 26 K 8480 Tractor
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.	Shankarrao Aanandrao Nadre age 42 year R/o Krushnur Tq. Naigaon MH 26 19960001272 RTO Nanded
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Parasram Rama Rathod R/o Krushnur Tq. Naigaon
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said insurance Company.	United India Insurance Comp. Nanded
10	Number of Insurance Policy/Insurance Certificate and the date of Validity of the insurance Policy/Insurance Certificate.	230600311 G.P. 108616123 Date 29/11/2016
11	Action taken if any and the result there of	An offence has been registered against the accused after Completion of the Investigation Charge Sheet has been Submitted against the accused.

Inspector of Police  
Police Station Kuntur

दि. 22/09/2017

प्रति,

मा.सहा.पोलीस निरक्षक साहेब,

पोलीस ठाणे, कुंटूर

विषय :- अपघात होऊन माझ्या चुलत भाऊ संजय मोहनराव कदम हे मरण पावले बाबत...

महोदय,

उपरोक्त विषयानुसार सविनय सेवेत अर्ज सादर करण्यात येते की, मी बालाजी माधवराव कदम वय 36 वर्षे, व्यवसाय शेती रा.दुगांव ता.बिलोली जि.नांदेड येथील रहिवाशी असून मी माझा मावस भाऊ तिरुपती खैरगावे यांची मोटारसायकल क्र. MH26- AX-7368 हे घेऊन श्री च्या विसर्जनासाठी माझा मित्र संतोष आनंदराव शिंदे व मी जात होतो. माझा मयत भाऊ संजय मोहनराव कदम त्याच्या मोटारसायकलवर क्र. MH26- AB-8953 वर असे दोन मोटार सायकल घेऊन दि.05/09/2017 रोजी रात्री 9.30 च्या सुमारास श्री च्या विसर्जनासाठी दुगांव येथून राहेर गोदावरी नदीकडे जात होतो. संजय त्याची मोटार सायकल घेऊन माझ्या पुढे होता राहेर येथील युवराज ढाबाच्या समोर कारेगांव फाट्याकडून एक ट्रॅक्टर चालक हथगयीने व निष्काळजीपणाने ट्रॅक्टर चालून माझा भाऊ संजय यांच्या मोटार सायकलला धडक दिला त्यामध्ये संजय यांच्या कपाळाला व डोक्यावर जबर मार लागून तो जखमी झाला. त्यास मी नेलेल्या मोटार सायकलवार सरकारी दवाखाना नायगांव येथे घेऊन गेलो तेथील डॉक्टर साहेबानी तात्पुरता उपचार करून नांदेड येथे रेफर केले त्यास आम्ही अम्बुलन्सने यशोसाई हॉस्पिटल नवीन कौठा नांदेड डॉक्टर ऋतुराज जाधव यांच्या दवाखान्यात अडमिट केले. त्याच्यावर उपचार चालू असताना दि.07/09/2017 रोजी रात्री 1 वाजून 48 वाजता तो मरण पावला.

पान. 2 वर

## CRIME DETAILS FORM

घटनास्थळाचा पंचनामा/गुन्हयाचा तपसील नमुना

1. राज्य-महाराष्ट्र, जिल्हा-नांदेड, पोलीस स्टेशन-कुंठूर, पहीली खबर/कार्यवाही क्र. /2017 दिनांक

2. अधिनियम व कलम :- सा ४६ कि कायदा १९५८, ४०५ (१)

3. घटनेचे ठिकाण दाखविण्याचे :-

नाव :- काळजी कदर वडीलाचे/पतीची नांव :- महाबळी कदर  
वय :- ६६ वर्ष, धंदा :- होस्टेल जात :- मराठी मोबाईल नंबर :- ९०९९९९९९९९  
रा. :- कुंठूर तालुका नांदेड जिल्हा नांदेड राज्य महाराष्ट्र

4. गुन्हयाचा प्रकार (गुन्हयाचे सर्व पध्दतीसह) :-

i) प्रधान शिर्ष :- हत्या  
ii) प्रधान शिर्षचे वर्गीकरण :-  
iii) पध्दती :-

iv) वापरलेली वाहणे :-

v) केलेले वेषांतर/केलेली ब्रतावणी :-

vi) वापरलेली भाषा/बोली भाषा :-

vii) विशेष वैशिष्ट्य-1 :-  
विशेष वैशिष्ट्य-2 :-  
विशेष वैशिष्ट्य-3 :-

viii) घटनेच्या ठिकाणाचा प्रकार :- मोठे मोठे विकार होऊन ते कोठ्यावर काळजी  
काळजी डॉक्टरांच्या माध्यमातून जमराड वारसा  
आले ठिकाण

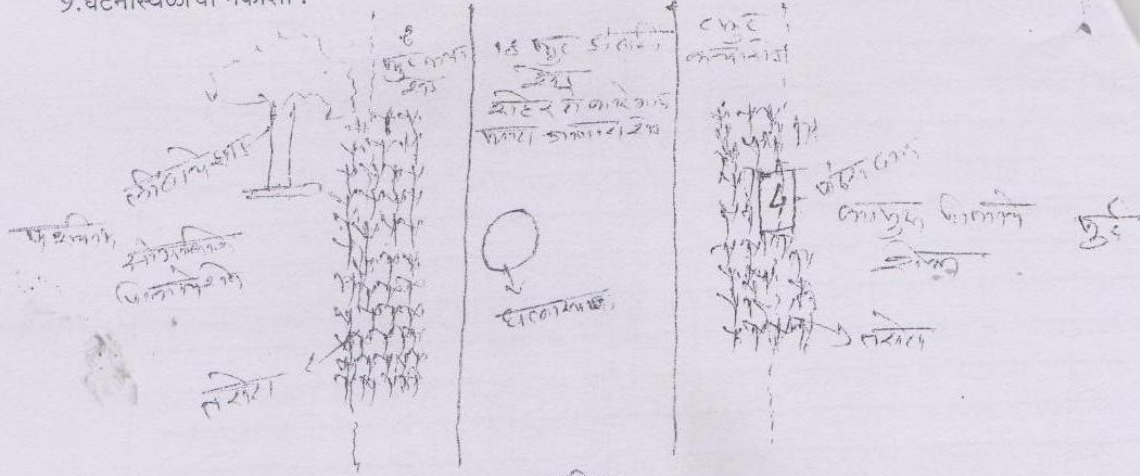
ix) अंतर्भूत मालमतेचा प्रकार :-  
1) :-  
2) :-  
3) :-  
4) :-





(4)

9. घटनास्थळाचा नकाशा :-



10. तपासकामी प्रत्यक्ष पुरावा म्हणुन गुन्ह्याचे जागेवरून मिळविलेल्या / जप्त केलेल्या भालपत्तेच वर्णन :-

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11. घटनास्थळ पंचनाम्याची दिनांक 23/9/2017 वेळ 10.00 ते 10.45 वार

12. पंचाची नावे व संपूर्ण पत्ता आणि सही :-

1) आलका आवसारे व कारवाडे वय 32 वर्षे

तपासकामी हीरो 16 नाळु आ. शिंदे ला. कामगाव (26)  
मो. 7063978824

2) आवसारे व पि. आवसारे वय 22 वर्षे

तपासकामी मधुसू 21. शिंदे ला. कामगाव (26)  
मो. 7028127543

घटनास्थळ दाखविणा-याची सही

दिनांक 23/09/2017

तपासीक अमलदाराची सही :-

नाव :- वि. बी. पशिळ

पदनाम :- आ. पो. किरासत

पोलीस स्टेशन कुंदर

M.L.P.M.No.:- 804/17

Dt:- 7/9/17

Report of a post-mortem examination held at Dr. S. C. G. M. C. Nanded Dispensary  
Hospital  
on the dead body of Sanjay Mohanrao Village Dugraon  
of Kadam City

Taluka Biloli, District Nanded, by Dr. H. B. Deshpande

I. General Particulars—

1. (a) By whom was the corpse sent? - NPC Gavanikar, 1230  
P.S. Nanded (Gramin)
- (b) Name of place from which sent. } - Casualty  
Dr. S. C. G. M. C.
- (c) Distance of place from which sent. } Nanded
2. By whom was the corpse brought? } - NPC Gavanikar, 1230  
P.S. Nanded
3. By whom identified? } (Gramin)
4. The date, hour and minute of its receipt. - ON 7/9/17 at 9.25am
- (a) The date, hour and minute of beginning post-mortem examination. - ON 7/9/17 at 9.35am
- (b) The date, hour and minute of ending post-mortem examination. - ON 7/9/17 at 10.35am
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 & requisition, the deceased with history of motorcycle accident on 5/9/17 admitted in Yashwantrao hospital, Nanded where he died on 7/9/17 at 01.48hr.  
Supposed cause of death - Head injury

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.

- male, 30 yrs

Description of clothes and of ornaments on the body.

- one white shirt & black pant present

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

- Intact, dry, handed over to P.C. on duty.

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

- Body identified by P.C. on duty.

- Teeth - Intact, 16/11s

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



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

- Averagely nourished,  
 Cold body.

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

- Well marked

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 posterior aspect of body except at pressure areas, 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 - Natural  
 Eyes - Closed  
 Cornea - Hazy  
 Mouth - Closed  
 Tongue - Inside mouth  
 No oozing present

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

- Dry & pale

15. Injuries to external genitals.  
Indication of purging.

- NO injury, NO purging

→ Straight

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, posi-  
tion, 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?



Yes, ante mortem

① Stapled wound present on  
fronto-temporo-parietal area, of  
length 27 cm & 34 sutures (staples)  
present in situ, 'C' shaped with concav-  
ity forwards suggestive of therapeutic  
craniotomy wound. on opening  
the staples, piece of underlying cranium  
bone of size 17 cm x 11 cm absent with  
oval craniotomy defect, underlying  
dura cut with brain matter bulging  
out through oval defect.

② Sutured wound present vertically on  
right periumbilical area, 7 cm lateral to  
umbilicus, of length 12 cm with 10  
sutures in situ. on opening sutures,  
piece of cranium bone mentioned in  
injury no. ① present in subcutaneous tissue.

③ Contusion with swelling present on  
right frontal area, in an area of size  
6 cm x 4 cm, reddish.

④ Periorbital contusion present around  
both eyes, of sizes 4 cm x 3 cm & 3.5 cm x  
2.5 cm respectively, dark red.

⑤ Lacerated wound present just lateral  
to left eyebrow, obliquely placed, of size  
3 cm x 0.8 cm x tissue deep with 2 sutures  
present in situ.

⑥ Multiple contused abrasions present on  
bridge of nose, root of nose, left maxil-  
lary area, left zygomatic area, of sizes  
varying from 4 cm x 2 cm to 2 cm x 1 cm,  
red with fracture of underlying bones.

⑦ Contused abrasion present on left  
elbow, of size 3 cm x 2 cm, red.

⑧ Grade abrasion present on flexor aspect  
of right forearm, upper 1/3rd directed obliquely  
downwards, of size 7 cm x 2.5 cm, red.

⑨ Multiple contused abrasions present on  
right leg & both foot, sizes varying  
from 6 cm x 1.2 cm to 2 cm x 1 cm, red.

⑩ Avulsion laceration present to both greater  
toe, of sizes 3 cm x 1.5 cm & 2.5 cm x 1 cm  
respectively, tissue deep, margins  
abraded, red.

## Internal Examination—

## 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).

- Underscalp haematoma present on left fronto-parietal and right fronto-temporal area, dark red.

- ① Fracture of right frontal & right temporal bone present  
 ② Middle cranial fossa fractured, anteriorly

- Meninges - torn corresponding with injury no. ① in column no. 17

- Brain - soft, oedematous

- Diffuse subarachnoid haemorrhages present all over brain surface, red.

- Subdural haemorrhage present on right fronto-temporo-parietal lobe, red.

- Multiple contusions present on bilateral frontal, parietal & temporal lobes, red.

## 20. Thorax—

- (a) Walls, ribs, cartilages - Intact, no fracture
- (b) Pleura - Intact
- (c) Larynx, Trachea and Bronchi. - Intact
- (d) Right Lung } - Intact, congested
- (e) Left Lung }
- (f) Pericardium - Intact
- (g) Heart with weight - Intact, blood & blood clots present
- (h) Large vessels - Intact
- i. Additional remarks - Nil

21. Abdomen—

Walls	- Intact
Peritoneum	- Intact
Cavity	- No free fluid
Buccal Cavity, teeth, tongue and Pharynx.	- Intact, no foreign body
Esophagus	- Intact
Stomach and its contents	- Intact, contain about 50ml yellowish fluid, no abnormal smell perceived, mucosa congested
Small intestine and its contents.	} - Intact; partly loaded with gases & faeces
Large intestine and its contents.	
Liver (with weight) and gall bladder.	- Intact, congested
Pancreas and Suprarenals	- Intact, congested
Spleen with weight	- Intact, congested
Kidneys with weight	- Intact, congested
Bladder	- Intact
Organs of generations	- Intact
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.	- Nil
State which viscera (if any) have been retained for chemical examination and also quote the numbers on the bottles containing the same.	- viscera not preserved

Head and Spinal Cord—

Intact, not opened

Opinion as to the cause  
probable cause of death.

- "Head injury"



Dr. H. B. Deshpande

Dated 7/9/17 200

(Signature)

\*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 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*.

P. m. No. :- 804/17

200

Dt. :- 7/9/17

Place Dispensary  
Civil Hospital

Dr. S. C. G. M. C.

200

Nanded

Forwarded to the Police Sub-Inspector

P. S. Nanded  
(Gramin)  
of

200

for information with reference to his No.

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

D. H. B. Deshpande

Civil Surgeon or M. M. S. Officer

Dept. of Health & Family Welfare  
Dr. S. C. G. M. C. Yashwantrao  
Nanded-431005

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