

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	Kuntur Dist.Nanded
2	CR.NO./TAR No./SDE No.	99/2024 U/S 279, 304(a) of I.P.C r/w 134/117 mv act
3	Date, Time and Place of the accident.	05/06/2024 at 18.00 hrs Nanded to Narsi road near Kahala (bk) Tq. Naigaon dist. Nanded.
4	Name of the Injured / Deceased	Parubai Sitaram Gajbhare age 70 years r/o Kahala (ku) tq. Naigaon dist. Nanded
5	Name of Hospital to Which he/she was removed	Govt. Hospital Nanded
6	Number of vehicles and type of the vehicle	MH 31 DX 1388 Travels
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.	Manjitsingh GGurumejsingh Kalsi age 45 years r/o Abachalnagar Nanded tq. dist. Nanded MH 26 20100026353 RTO Nanded
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Harvindar singh Sujansingh Kamthekar r/o Kamtha (bk) tq. Ardhapur 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.	The new India Assurance comp.ltd.
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	1609002310017590 10/10/2024
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 Kuntur
 Dist. Nanded (M.S)

जबाब

दि. 17/06/2024

मी यादव सिताराम गजभारे वय 46 वर्ष व्यवसाय शेती रा. कहाळा (खुर्द) ता. नायगाव
जि.नांदेड मो.नं. 9767533058.

समक्ष पोलीस स्टेशनला हजर येवुन जबाब घेण्यास सांगतो की, मी वरील ठिकाणचा राहणारा
असुन मला दोन मुले असुन मी, माझी पत्नी, दोन मुले व आई वडील असे एकत्र राहत होतो. मी
शेती करून कुटुंबाचा उदर निर्वाह करतो.

दि. 15/06/2024 रोजी सायंकाळी वेळ अंदाजे 06.00 वाजताचे सुमारास मी माझे घरी
असताना माझा मुलगा नामे उध्दवराव याने मला सांगीतले की, आजी पारुबाई सिताराम गजभारे ही
कहाळा खु येथील बाजारातून भाजीपाला घेऊन पायी रोड क्रॉस करून घराकडे येत असतांना नायगाव
कडून नांदेड कडे जानारी लकड़री बस क्र. MH 31 DS 1388 ने जोराची धडक देऊन निघून गेली
आहे. आजीच्या डोक्याला गंभीर पणे मार लागला असून मी तिला उपचारासाठी सरकारी दवाखाणा
विष्णुपुरी नांदेड येथे स्वप्नील हेंडगे यांच्या कारने घेऊन जात आहे तुम्ही लवकर या असे म्हणात्याने मी
व माझा पुतन्या शिवराज राजेश गजभारे असे मोठार सायकलने सरकारी दवाखाना विष्णुपुरी नांदेड येथे
जाऊन पाहीलो असता आपघात विभाग रुम नं.52 मध्ये माझ्या आईवर उपचार चालू होते.

पुन्हा माझ्या आईस पुढील उपचारकामी आ.सी.यु.वार्ड क्र.30 मध्ये नेऊन उपचार चालू केले.
तेथे उपचार चालू असतांना दि.15/06/2024 रोजी रात्री 11.00 वाजता वैद्यकीय अधिकारी यांनी
माझी आई पारुबाई ही मरण पावली आहे असे सांगीतले आहे.

दि.16/06/2024 रोजी माझ्या आईच्या प्रेतावर सरकारी दवाखाना विष्णुपुरी नांदेड येथे
पि.एम.करून प्रेत पुढील अंत्यविधी साठी माझ्या ताब्यात दिल्याने आम्ही माझ्या आईचे प्रेत आमचे
गावी मौ. कहाळा खु येथे आणून सर्व नातेवाईक मिळून अंत्यविधी केली आहे व आज रोजी पोलीस
स्टेशनला हजर येऊन समक्ष जबाब देत आहे.

तरी दि.15/06/2024 रोजी सायंकाळी वेळ अंदाजे 06.00 वाजताचे सुमारास माझी आई
पारुबाई सिताराम गजभारे वय 70 वर्ष व्यवसाय घरकाम रा. कहाळा खु ही कहाळा खु येथील
बाजारातून भाजीपाला घेऊन पायी रोड क्रॉस करून घराकडे येत असतांना नायगाव कडून नांदेड कडे
जानारी लकड़री बस क्र. MH 31 DS 1388 च्या चालकाने त्याच्या ताब्यातील लकड़री बस ही
हायगाई व निष्काळजी पणाने भरधाव वेगाने चालवून जोराची धडक देऊन निघून गेला आहे. त्यामुळे
माझ्या आईच्या डोक्याला गंभीर पणे मार लागून उपचारादरम्यान मरण पावली आहे. तरी यातील
लकड़री बस क्र. MH 31 DS 1388 चालक हा माझे आईचे मरणास कारणीभून झाला आहे. तरी
सदर लकड़री चालकावर योग्य ती कायदेशीर कारवाही होण्यास विनंती आहे.

माझा जबाब माझे सांगणे प्रमाणे संगनकावर टाईप केला तो मी वाचून पाहीला बरोबर व खरा
आहे.

समक्ष

हा जबाब दिला सही

भाद्र

19-17/6/2021, 12:11 AM.

SD No. 12 वर्ष २०८०/८१

क्र. २७९, ३०५(३) १३६/१८८

मो. वा. क्र. ५८/१६५ ४८५८८८८८८८

पुस्तक अपार्क APR २०५-२०६

आनंदशाला HSE उत्तर २०५-

प्राप्ति संख्या R. १२

82

पालीस ठाणे अंगतवार

पालीस स्टेशन कुंडा

CRIME DETAILS FORM

घटनास्थळाचा पंचनामा/गुन्ह्याचा तपसील नमुना

1. राज्य-महाराष्ट्र, जिल्हा-नांदेड, पोलीस स्टेशन-कुंदुर, पहीली खबर/कार्यवाही क्र. ७७ /2024 दि. १७/६/2024

2. अधिनियम व कलम :- २७९ ३०४(अ) माझी सूख क १३४। १७७ मोर्डा का

3. घटनेचे ठिकाण दाखविण्याचे :-

नांव : यात्रव वडीलाचे/पतीचे नांव : सिताराम डोऱ्यार
 वय ५६ वर्ष, धंदा शोली जात : मोबाईल नंबर : ९८६७५३३०५८
 रा. कुडाळ (स्व) तालुका भाडाम जिल्हा नांदेड राज्य महाराष्ट्र

4. गुन्ह्याचा प्रकार (गुन्ह्याचे सर्व पद्धतीसह) :-

i) प्रधान शिर्ष :- हयगामी वाहन चालकुन मरण घावले
 ii) प्रधान शिर्षचे वर्गीकरण :
 iii) पद्धती लक्षणी आत्मविने त्याचे तावातील वाढणी
 लक्षणी वस कुम्ह-३। DS-1388 ही हयगामी भरण्यावे केंगा
 चालकुन भयताच इडकु देतुन ओवीर भयमी उल्लंघन
 मरणास काळीभुन घावले

iv) वापरलेली वाहणे : लक्षणी वस कुम्ह-३। DS-1388

v) केलेले वेषांतर/केलेली बतावणी :

vi) वापरलेली भाषा/बोली भाषा :

vii) विशेष वैशिष्ट्य-१ :-

विशेष वैशिष्ट्य-२ :-

विशेष वैशिष्ट्य-३ :-

viii) घटनेच्या ठिकाणाचा प्रकार : मी कुडाळ (स्व) भाडाम ने नांदेड रोड

ix) अंतर्भूत मालमत्तेचा प्रकार :-

1) :- 2)

3) :- 4)

(2)

FORM - II

5. बळीचा तपशिल (अवश्यक असल्यास स्वतंत्र कागद जोडावा) :-

अ. क्र.	संपूर्ण नांव	जन्म तारीख /वय	लिंग	राष्ट्रीयत्व	धर्म	जाती/ जमाती	व्यवसाय	पता	दुश्यपत गंभीर/ साधी	नोट/ हाथार
1	2	3	4	5	6	7	8	9	10	11
	परेश कुमार सिंह राम गवाह	७० वर्ष	स्त्री	भारतीय	हिंदू	बौद्ध धरकाम	कृष्ण	मुमुक्षु	मुमुक्षु	(23)

6. गुन्हयाचा हेतु :- उपायीचे वादन यात्रुमें

7. चोरीच्या/अतंभूत मालमत्तेचा तपशील :-

8. घटनेच्या जागेचे वर्णन :-

१०. घटनेच्या जागेचे वर्णन (पुढे चालु) :-

S. धर्मेच्या जागेचे वर्णन (पुढे चालू) :-

जाईला डाक्टर आवाली नागा दृश्यमा (प्रत्युभे आवाली
व प्रत्युभे साठीना दृश्यमात्र दृश्यमात्र); ॥
सदृश्य दृश्यमात्रम् प्राप्ता मी कृष्ण (२५).
ग्रावालीले भावार्थाव ले नाही नाही वावीच मध्यमात्र
कोऽमृताना नाही शी पाईट शोष दिसा आहे
अदृश्य २५ दोवरी उमाची आसुन कृष्णाची दृश्यी
दोषी ओटानु २०३२ आहे. दोषी मध्यमात्री उमाची
देश आहे. सदृश्य शीकाळी दृश्याची ले आवाली
आसुन नावीकाळी रवीकृष्ण दिसा आहे.
सदृश्य दृश्यमात्रम् चतुर्षीमा प्राप्ता पुढील
प्रत्युभी.

ग्रन्थ - अमरा विद्या के लिए सोलही रस

पश्चिमी - नारेस के लियोनी लैंडरी 275

એજિટેડ - એજિટેડ એક મોટી સિરીઝ

3m24 - वॉक्स हार्डवेल ट्रॉनरी सोबरी
215-2446196 साथी विकार 3 काम

2015 (cont'd.)

Latitude 18.968564

Longitude - 77.445678

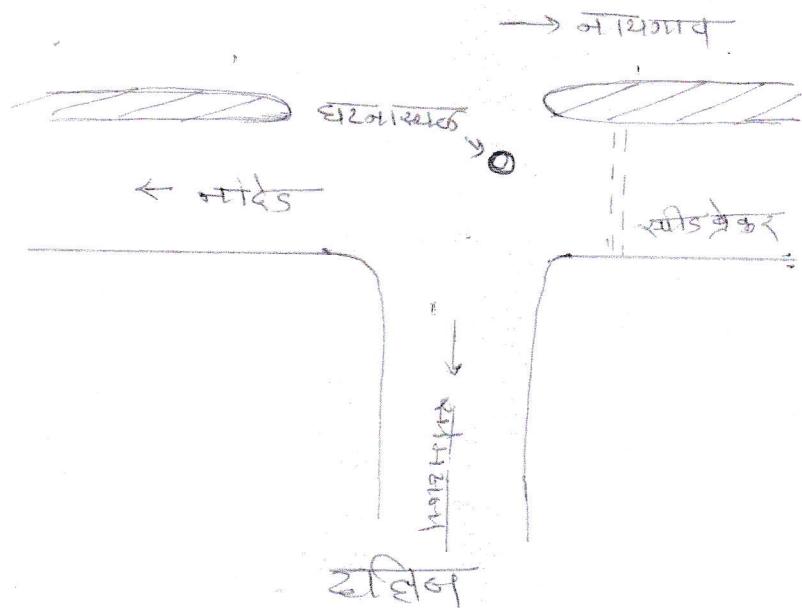
(4)

9. घटनास्थळाचा नकाशा :-

3मंड़

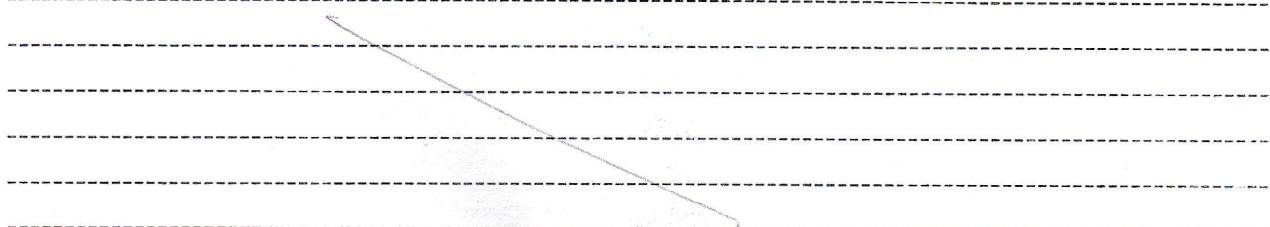


प्रवेशमात्र



पुढी

10. तपासकामी प्रत्यक्ष पुरावा म्हणुन गुह्याचे जागेवरुन मिळविलेल्या / जप्त केलेल्या मालमत्तेच वर्णन :-



11. घटनास्थळ पंचनाम्याची दिनांक 17/6/2024 वेळ 14:00 ते 15:00 वार सामवार

12. पंचाची नांवे व संपुर्ण पत्ता आणि सही :-

1) साईबराव डिवाबर काठी वय 57वर्ष
प्रवस्थाप शोभा रुक्मिणी (अंगुष्ठ) ता नायेगाव
- 9764630616

स्पौष्ट्याव

2) उमराव माझवराव कारताळ वय 50वर्ष
प्रवस्थाप शोभा रुक्मिणी (अंगुष्ठ) ता नायेगाव

उमराव

त. अमलंदाराची सही

नाव :- एम अमराव

पदनाम :- सपोउपानी कुमार

दिनांक :- 17/6/2024

MLPM no :- 793 | 2024
Date :- 16/06/2024

Memorandum of a Post-mortem examination held at Dr S. C. G. M. C & H, Nanded.

Dispensary
Hospital

On the dead body of PARUBAI SITARAM of Village
GAJABHARE City KAHALA

Taluka NAIGAON

District NANDED

by

Dr A. J. Pundge

Dr M. N. Mortade

Dr Anitabh Singh.

I. General Particulars—

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

P.H.C M.V. GAWALI [B.no - 124]
P.S - Nanded Gramin.

- (b) Name of place from which sent.

Dr S.C.G.M.C & H, Nanded.

- (c) Distance of place from which sent.

P. C J.R. Thakur [B.no - 2756]
P.S - Nanded Gramin

2. By whom was the corpse brought ?

3. By whom identified ?

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

16/06/2024 at 02:30 A.m.

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

16/06/2024 at 07:10 A.m.

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

16/06/2024 at 08:10 A.m.

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 and requisition letter deceased with alleged history of road traffic accident on 15/06/2024 at 18:00 hours, in which severely injured and brought to Dr S.C.G.M.C & H, Nanded, where admitted to Ward no 30, and died during treatment on 15/06/2024 at 23:00 hours. Supposed cause of death severely injured in road traffic accident.

Indoor Patient no :- 24/I/34912
of Dr S.C.G.M.C 24

Date of admission :- 15th June 2024,
at 08:40 P.M.

2

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—

Diagnosis :- Auto Road traffic accident with blunt trauma head with blunt trauma chest & left palpable rib fracture & left I.C.D insertion done.

Not applicable.

II. External Examination—

7. Sex, apparent age, race or caste.

Female, 70 years old.

Brown colour saree, red colour blouse, brown colour petticoat, golden-green colour 12 bangles on right forearm, red colour bindi in midline of forehead, hospital label on left foot.

8. Condition of the clothes—

whether wet with water, stained with blood or soiled with vomit or foecal matter.

Stained with blood at places, dry and handed over to police constable 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 police on duty.

Teeth = absent.

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.

Thin built, cold.

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

Well marked in whole 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 over posterior aspect of body except pressure areas, not fixed.

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

Facial features :- Natural and identifiable.

Eyes :- Close

Pupils :- Dilated and fixed.

Mouth :- Partially open

Tongue :- Inside mouth

No oozing from mouth, nostrils or ears.

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

} Dry.

15. Injuries to external genitals.
Indication of purging.

Intact, no injuries to external genitalia.

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, position, dimensions (measured) and direction 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.

① Sutured wound present over left side parieto-temporal bone region, of length 3cm with 3

black colour suture present in situ, on removal of sutures laceration of size 3.5cm x 1cm x bone deep, margins irregular and red in colour.

② Abrasion present over tip of left shoulder, of size 1cm x 0.5cm, ~~stratified~~ ^{Avagath} obliquely placed, red in colour.

③ Contusion present over left arm, distal $\frac{1}{3}$ part, lateral aspect, of size 6cm x 3cm, obliquely placed reddish-blue in colour.

④ Gaze abrasion present over right shoulder, tip of shoulder extending towards posterior aspect of right shoulder, of size 8cm x 2cm directed upwards, obliquely placed, red in colour.

⑤ Surgical incised wound present over left side of chest, in axillary line, at the level of 5th intercostal space, of size 1cm x 0.8cm x cavity deep, suggestive of therapeutic intercostal drainage tube insertion site, margins clean cut, red in colour.

⑥ Puncture wound present over left forearm, middle $\frac{1}{3}$ part, dorsal aspect, suggestive of therapeutic intravenous cannula mark, red in colour.

⑦ Puncture wound present over left forearm, distal $\frac{1}{3}$ part, ventral aspect, near wrist, suggestive of therapeutic intravenous cannula mark, red in colour.

Intact, no evidence of any palpable fracture.

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

Yes, antemortem.

III. Internal Examination—

19. Head—

- (i) Injuries under the scalp. describe 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).

→ ① Under scalp contusion present over parieto-occipital bone of both sides, over an area of 12cm x 7cm, dark red in colour.

Linear fracture present over left side occipital bone running downwards and then forwards to reach left side middle cranial fossa, fracture margins irregular and infiltrated with blood

Meninges = Intact and congested.

Brain : Subdural haemorrhage present over occipital lobe of both sides and posterior aspect of cerebellum.

Subarachnoid haemorrhage present diffusely over the cerebrum.

Traumatic contusion present over base of temporal lobe on both sides.

20. Thorax—

(a) Walls, ribs, cartilages

→ ① Fracture of ribs present over anterior aspect, left side in mid clavicular line, involving 1st to 6th ribs, fracture margins irregular and infiltrated with blood.

(b) Pleura

Right intact

Left about 200ml

(c) Larynx, Trachea and Bronchi.

→ ② Fracture of ribs present over posterior aspect, left side at the level of costovertebral junction, involving 1st to 6th ribs, fracture margins irregular and infiltrated with blood.

(d) Right Lung

Intact, no foreign body present.

(e) Left Lung

Both lungs intact, congested and markedly oedematous. On cut section blood and blood tinged froth oozing out.

(f) Pericardium

Intact, no free fluid

(g) Heart with weight

→ Intact, blood and blood clots present.

(h) Large Vessels

(i) Additional remarks.

Nil.

21. Abdomen—

Walls

Peritoneum

Cavity

Buccal Cavity, teeth, tongue
and Pharynx.

Oesophagus

Stomach and its contents Greenish colour fluid about 300 ml present mixed with semi digested food material, no abnormal smell perceived, mucous pale.

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 Intact and empty

Organs of generation 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.

Not commentable.State which viscera (if any)
have been retained for
chemical examination and
also quote the numbers on
the bottles containing the
same.

Viscera and other than viscera articles not preserved.

22. *Spine and Spinal Cord—

Intact and not opened.

Opinion as to the cause
probable cause of death.

"Head injury with blunt trauma to chest."

Pundge
 [Dr. A. J. Pundge]
 Assistant Professor
 Dept. Of Forensic Medicine
 Dr.S.C.Govt.Medical College
 Vishnupuri,Nanded-431606

7/7/2024
 [Dr M. N. Mortade]
 Resident Doctor
 Dept. Of Forensic Medicine
 Dr.S.C.Govt.Medical College.
 Vishnupuri,Nanded-431606

Anuradha Singh
 [Dr Anuradha Singh]
 Resident Doctor
 Dept. Of Forensic Medicine
 Dr.S.C.Govt.Medical College.
 Vishnupuri,Nanded-431606

Dated

16/06/ 2024.

(Signature)

*This 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.

MLPM No. :- 793/2024

Date :- 16/06/2024.

Dispensary
 Place _____ Dr S.C.G.M.C & H, Nanded.
 Civil Hospital

Forwarded to the Police Sub-Inspector Nanded Gramin

for information with reference to his No. PM2C/RDS/5733/2024 of 15/06/2024.

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

Ani Singh
 [Dr Anisukh Singh]
 Resident Doctor
 Dept. Of Forensic Medicine
 Dr.S.C.Govt.Medical College.
 Vishnupuri,Nanded-431606

M.N. Mortadé
 [Dr M.N. Mortadé]
 Resident Doctor
 Dept. Of Forensic Medicine
 Dr.S.C.Govt.Medical College.
 Vishnupuri,Nanded-431606

Ramde
 [Dr A. J. Punde]
 Civil Surgeon & Professor Officer
 Dept. Of Forensic Medicine
 Dr.S.C.Govt.Medical College
 Vishnupuri,Nanded-431606

Copy forwarded with compliments to the Civil Surgeon.

for information.

M. M. S. Officer



Seen and examined by the Civil Surgeon.

20

Remarks of the Civil Surgeon,

(if any)

Civil Surgeon