

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.	56/2024 U/S 279,304(a) of I.P.C
3	Date, Time and Place of the accident.	15/02/2024 at 19.00 hrs at Nanded to Narsi road near Kahala Tq. Naigaon dist. Nanded.
4	Name of the Injured / Deceased	Maroti Ramkishan Kadam age 58 years r/o Magalsangvi tq. Kandhar 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 26 CK 6451 Motor cycle
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.	Amol Khandu Navande age 34 years r/o Jadhav galli Kushnur tq Naigaon dist. Nanded MH 38 20130002529 RTO Nanded
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Maroti Ramkishan Kadam age 58 years r/o Magalsangvi tq. Kandhar 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.	Without insurance
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	Without insurance
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)

मी पवन मारोती कदम वय 20 वर्ष व्यवसाय - शेती रा. मंगल सांगवी ता. कंधार ता. नायगांव जिल्हा नांदेड मो.नं. 9307406952

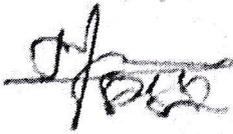
पोलीस स्टेशन कुंदुर येथे आकरमात मृत्यू क्रमांक 06/2024 च्या चौकशी मध्ये विचारले वरून जबाब देतो की, मी वरील ठिकाणचा राहणारा असून मी, माझे वडील, सायब आई - रांगीता, पत्नी असे एकत्र राहत होतो. मी व माझे वडील असे एकत्र राहून शेती करून कुंदुराची उपजिवीका भागवित होतो.

दि. 15/02/2024 रोजी सकाळी 10.00 वाजताचे सुमारास माझे वडील नामे मारोती रामकिशन कदम हे आमचे हीरो हॉडा शाईल कंपनीचे मोटार सायकल क्र MH-26 CK-6451 वर बसून नायगाव येथे जनावरांचे बाजारासाठी गेले होते तेथे दिवसभर बाजार करून सायंकाळी अंदाजे वेळ 06.00 वाजता कृष्णूर येथील आमचे नातेवाईक नामे अमोल खंडु नावंदे यांचे गेल्याचे मला फोनवर सांगितले. रात्री वेळ अंदाजे 07.30 वाजताचे सुमारास मला अमोल नावंदे यांनी फोन करून सांगितले की, मी व तुमचे बाबा मारोती कदम असे मोटार सायकलवर बसून कृष्णूर येथून कहाळा (खु) येथे येत असताना, मारोती कदम हे कहाळा (खु) गावाजवळील गतीरोधक येथे मोटार सायकलवरून मागच्या मागे पडले असून त्यांचे डोक्याला मार लागला आहे. आम्ही त्यांना नांदेड येथील सरकारी दवाखान्यात घेवून येत आहोत तुम्ही या असे कळविल्याने मी व माझे नातेवाईक असे मिळून नांदेड येथे सरकारी दवाखाना विष्णुपुरी येथे आलो व बाबांना पाहीलो असता ते नेशुद्ध अवस्थेत होते. त्यांचे डोक्याला पाठीमागे जास्त मार लागला होता. त्यांचेवर उपचार चालू होते. दि. 17/02/2024 रोजी उपचार चालू असताना ते वेळ अंदाजे 09.30 वाजताचे सुमारास मरण पावले. त्यांचेवर पी.एम. करून प्रेत ताब्यात दिल्याने त्यांचेवर गावाकडे मंगलसांगवी येथे अंतविधी करण्यात आली. आम्ही दुःखत असल्याने आज रोजी मनस्थिती चांगली झाल्याने सदर प्रकरणी जबाब देत आहे.

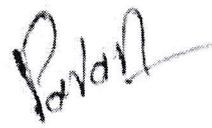
तरी दि. 15/02/2024 रोजी सायंकाळी अंदाजे वेळ 19.00 वाजताचे सुमारास माझे वडील नामे मारोती रामकिशन कदम व नातेवाईक अमोल खंडु नावंदे रा. कृष्णूर ता. नायगाव असे दोघे मिळून मोटार सायकल क्रमांक MH-26 CK-6451 वर बसून कृष्णूर ते कहाळा (खु) मार्ग गावाकडे येत असताना, अमोल खंडु नावंदे रा. कृष्णूर ता. नायगाव यांनी त्याचे ताब्यातील मोटार सायकल हयगय व निष्काळजणीपणे भरधाव वेगात चालविल्याने मोटार सायकलच्या पाठीमागे बसलेले माझे बाबा मारोती रामकिशन कदम वय 58 वर्ष रा. मंगलसांगवी हे मोटार सायकलवरून पाठीमागे खाली पडल्याने त्यांचे डोक्याला गंभीर मार लागून ते उपचार दरम्यान दि. 17/02/2024 रोजी सकाळी 09.30 वा सुमारास मरण पावले असून माझ्या वडीलांचे मरणास कारणीभूत होणा-यावर योग्य ती कायदेशीर कारवाही होण्यास विनंती आहे.

माझा जबाब माझे सांगणे प्रमाणे संगणकावर टंकलीखित केला त्याची एक प्रत काढून मला वाचून दाखविला माझे सांगणे प्रमाणे बरोबर व खरा आहे.

समक्ष



हा जबाब दिला सही



दि. 26.03.2024 चे नोंद नं. 1292
वेळ 13.50 वा. नुईने 5424 क्रमांक 229
पुण्यात शाहीर कारवाही दारपार करताना पुणे
पुण्यात कारवाही करताना पुणे
पुणे पोलीस ठाणे येथे घाबरा झाले
पोलीस ठाणे उभारले
पोलीस ठाणे उभारले

CRIME DETAILS FORM

FORM - 1

घटनास्थळाचा पंचनामा/गुन्हयाचा तपशील नमुना

1. राज्य-महाराष्ट्र, जिल्हा-नांदेड, पोलीस स्टेशन-कुंदूर, पहीली खबर/कार्यवाही क्र. 06/2024, दिनांक 19/02/2024
2. अधिनियम व कलम :- खलसा 174 CRPC

3. घटनेचे ठिकाण दाखविण्याचे :-

नांव :- विशाख वडीलाचे/पतीचे नांव :- बाबाजी शिंदे
वय 57 वर्ष, धंदा :- शेत जात :- मराठा मोबाइल नंबर :-
रा. कडगा (क) तालुका नांदेड जिल्हा नांदेड राज्य महाराष्ट्र

4. गुन्हयाचा प्रकार (गुन्हयाचे सर्व पध्दतीसह) :-

- i) प्रधान शिर्ष :- डाक्टरात मृत्यू
- ii) प्रधान शिर्षचे वर्गीकरण :- मोठ्या आयुष्याच्या पुरूष डायक
- iii) पध्दती :- चान्क डिस्कोना मरण पावला.

iv) वापरलेली वाहणे :-

v) केलेले वेषांतर/केलेली बतावणी :-

vi) वापरलेली भाषा/बोली भाषा :- मराठी

vii) विशेष वैशिष्ट्य-1 :-

विशेष वैशिष्ट्य-2 :-

विशेष वैशिष्ट्य-3 :-

viii) घटनेच्या ठिकाणाचा प्रकार :- मो. कडगा (क) सात वायरीय मळकाने साठवणार्
जायनाचे ते नांदेड येथील जायनाचे

ix) अंतर्भूत मालमत्तेचा प्रकार :-

1) ----- 2) -----

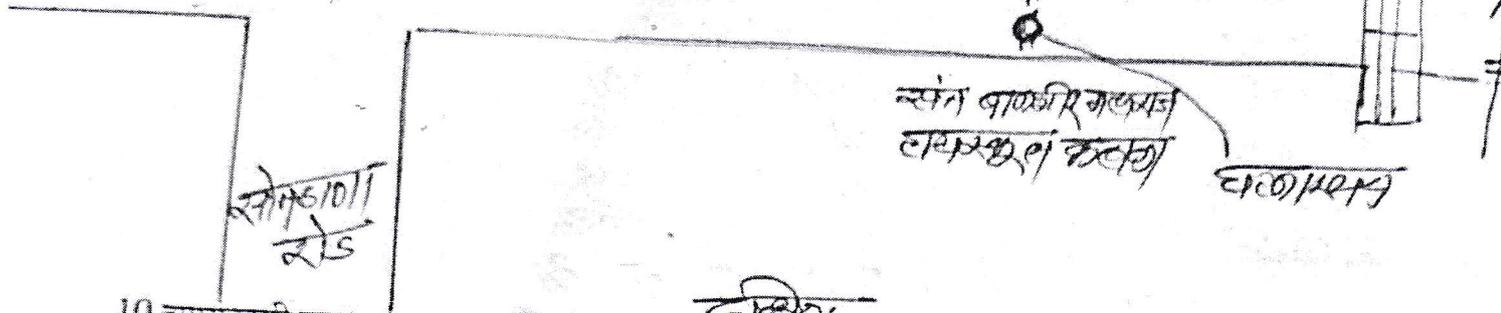
3) ----- 4) -----

काठगाव (२३)

स्त्री
देजे

नांगारात रुडचे
बांधे घात

देवागाव
↑



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

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11. घटनास्थळ पंचनाम्याची दिनांक 20/02/2024 वेळ 10:15 ते 10:55 वार

12. पंचाची नावे व संपूर्ण पत्ता आणि सही :-

- 1) विनायक बाबाजी शिंदे वर 37 वेळ
सा. काठगाव (२३) सा. नांगाराव 37/2024
- 2) विनायक बाबाजी शिंदे वर 38 वेळ
काठगाव शेत - सा. काठगाव (२३) सा. नांगाराव 38/2024

नांक 20/2/2024

तपासीक अधिकारी सही :- [Signature]

नावं : एन. एम. पोळे

पदनाम : सहायक उपनि

पोलीस स्टेशन : काठगाव सा. नांगाराव.

Memorandum of a Post-mortem examination held at
On the dead body of **Maroti Ramkishan Kadam**

MLPM NO:- 189/2024
Date: 17/02/2024

Taluka **Kandhar**

District **Nanded**

Village **Mangalrangvi**
City

Dispensary Hospital

I. General Particulars—

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

A.S.I. M.K. Gotamwad,
P.S → Nanded Gramin.

by [Dr. H.B. Deshpande]
[Dr. Sarath Kumar. P]
[Dr. S.L. Suryawarshi]

(b) Name of place from which sent.

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

(c) Distance of place from which sent.

2. By whom was the corpse brought?

A.S.I. M.K. Gotamwad,
P.S → Nanded Gramin.

3. By whom identified?

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

17/02/2024

at 01:22 PM

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

17/02/2024

at 02:00 PM

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

17/02/2024

at 03:00 PM

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 requestion letter, road traffic accident on 15/02/2024 at about 19:00 hours while riding on motorcycle from Nanded to Mangalrangvi near Kahala gaon, in which severely injured, admitted to ward no - (30) at Dr. S.C.G.M.C, Nanded, where died during treatment on 17/02/2024 at 09:30 hours.

Supposed cause of death - due to mechanical injury in RTA.

MRNO = 24/H/8699 - Date of admission - 15/02/2024

6. If not examined at Dispensary or Hospital—

Diagnosis - HIV +ve, A/H 10 neck fall, blunt injury to head + traumatic brain injury.

- (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, 58 years.

White colour lining shirt stained with blood. One white colour banyan, on black colour. One multicolour bedsheet, one red colour shawl around waist, hospital label present on pt's

Description of clothes and of ornaments on the body.

handed over to P.C on duty.

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

Body identified by P.C on duty.

Teeth - intact, 16/16.

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.

Not applicable.

well-nourished, thin
or emaciated, warm or cold.

[Faint handwritten notes]

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

Rigor Mortis well marked in jaw, neck
and absent in other body parts.

2. 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
present over posterior aspect of body except
pressure areas and 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
Eyes - closed.
Mouth - partially open, tongue inside mouth.
No oozing from ear, nostril and mouth.

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

Dry.

Indication of purpling. → 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.

straight.

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.

No palpable fracture.

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

- ① Sutured wound present over left parieto-temporal region of size 5cm with 4 suture incision, on removing suture laceration of size 5cm x 2cm x bone deep, margin's irregular.
- ② Abrasion present over left frontal region of size 5cm x 2cm, red colour sub present.
- ③ Sutured wound present over left side of size 3cm with 2 suture incision on removing suture laceration of size 3cm x 1.5cm x bone deep, margin's irregular.
- ④ Goared abrasion present over left elbow posterior-lateral aspect of size 6cm x 4cm, directed upwards, red colour sub present.
- ⑤ Goared abrasion present over left forearm of size 4cm x 2cm, directed upwards medial at exterior aspect, red colour sub present.
- ⑥ Therapeutic intravenous injection present over left hand dorsal aspect in colour.
- ⑦ Abrasion present over left leg Anterior aspect upper part of size 3cm x 2cm, red colour sub present.

Yes, Antemortem in nature.

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).

About 10 grams underlying haematoma present over left fronto parietal region, dark red.
underlying contusion present over left fronto temporo parietal region of size 10cm x 5cm, dark red in colour

Comminuted fracture present over left including frontal, temporal, parietal & occipital bone, fracture margins irregular and infiltrated with blood.

Meninges - Intact.

Brain -> About 60ml subdural haematoma present over both parietal region & frontal region, diffuse subarachnoid haemorrhage present, contusion present over left parietal, & right frontal, parietal & occipital region.

20. Thorax--

(a) Walls, ribs, cartilages -> left clavicle fracture present at middle, fracture margins irregular and infiltrated with blood.

(b) Pleura -> Intact, no free fluid

(c) Larynx, Trachea and Bronchi. -> Intact, No foreign body.

(d) Right Lung } Both lung's congested and oedematous.
(e) Left Lung }

(f) Pericardium -> Intact.

(g) Heart with weight } Intact, blood and blood clots present.

(h) Large Vessels

(i) Additional remarks. -> Nil.

21. Abdomen—

Walls → Intact, no injury.

Peritoneum } Intact, no free fluid.
Cavity }

Buccal Cavity, teeth, tongue and Pharynx. } Intact, no foreign body.

Oesophagus

Stomach and its contents → About 30ml yellowish fluid present, no odor, smell perceived, mucosa intact.

Small intestine and its contents.

Large intestine and its contents.

} Partely filled with gases and faeces.

Liver (with weight) and gall bladder.

Pancreas and Suprarenals

Spleen with weight

Kidneys with weight

Bladder → Intact, empty.

Uterus and ovaries → Intact.

Additional remarks with reference possible, medical examiner's deduction from the appearance of the contents of the stomach as to time of death is not possible.

} Not commentable.

High viscera (if any) were retained for further examination and the numbers of the viscera containing the

} viscera not preserved.

Intact.

Opinion as to the cause
probable cause of death.

“Head injury”

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

Soulaon
[Dr. Sarath Th Kumar P]
Resident Doctor
Dept. Of Forensic Medicine
Dr.S.C.Govt.Medical College,
Vishnupuri, Nanded-431606

[Signature]
[Dr. H. B. Deshpande]
Assistant Professor
Dept. Of Forensic Medicine
Dr.S.C.Govt.Medical College
Vishnupuri, Nanded-431606

Dated 17/02/2024

*This Spinal Cord need not be examined unless there are any indications of disease. Strychnine

Note— The report must be written and signed immediately after the examination. Medical Officer
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.