

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.	78/2021 U/S 279,337,338,304(a)of I.P.C.
3	Date, Time and Place of the accident.	23/02/2021 at 1835 hrs Bhokar to Kinwat raod at Ambedkar chouk Bhokar Tq. Bhokar dist. Nanded.
4	Name of the Injured / Deceased	Anknown Beggar
5	Name of Hospital to Which he/she was removed	Govt. Hospital Bhokar
6	Number of vehicles and type of the vehicle	MH 29 6680 Tempo
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.	Feroz mia Moula mia age 32 year r/o Gandhi nagar Bhokar Tq. Bhokar dist. Nanded MH 26 20020001530 RTO Nanded
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Mohamad Iliyas Abdul Wahid r/o Saidnagar Bhokar Tq.Bhokar 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.	Bajaj Allianz general insurance company ltd.
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	OG-19-7485-5214-05412001 09/04/2021
	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)

FIRST INFORMATION REPORT

(Under Section 154 Cr.P.C.)

प्रथम खबर अहवाल
(कलम १५४ फौजदारी प्रक्रिया संहिता)

1. District (जिल्हा): नांदेड

P.S.(ठाणे): भोकर

Year (वर्ष): 2021

FIR No.(प्रथम खबर क्र.): 0078

Date and Time of FIR (प्र. ख. दिनांक आणि वेळ): 23/02/2021 23:21 बजे

S.No. (अ.क्र.)	Acts (अधिनियम)	Sections (कलम)
1	भारतीय दंड संहिता १८६०	२७९
2	भारतीय दंड संहिता १८६०	३३७
3	भारतीय दंड संहिता १८६०	३३८
4	भारतीय दंड संहिता १८६०	304-A

3. (a) Occurrence of offence (गुन्ह्याची घटना):

1. Day(दिवस): मंगलवार

Date From (दिनांक पासून): 23/02/2021

Time Period (कालावधी): पहर 6

Date To (दिनांक पर्यंत): 23/02/2021

Time From (वेळेपासून): 18:35 बजे

Time To (वेळेपर्यंत): 18:35 बजे

(b) Information received at P.S. (माहिती मिळालेले पोलीस ठाणे):

Date (दिनांक): 23/02/2021

Time (वेळ): 21:47 बजे

(c) General Diary Reference (रोजनामचा संदर्भ)

Entry No. (नोंद क्र.): 039

Date & Time (दिनांक आणि वेळ): 23/02/2021 23:08 बजे

4. Type of Information (माहितीचा प्रकार): लेखी

5. Place of Occurrence (घटनास्थळ):

1.(a) Direction and distance from P.S.(पोलीस ठाण्यापासून दिशा व अंतर): पश्चिम, 1 किमी

Beat No. (बिट क्र.):

(b) Address (पत्ता): आंबेडकर चौक भोकर

(c) In case, outside the limit of this Police Station, then (या पोलीस ठाण्याच्या हद्दीबाहेर असल्यास):

Name of P.S.(पोलीस ठाण्याचे नाव):

District(State) (जिल्हा(राज्य)):


 दिगांबर पाडुरंग पाटील
 पोलीस उपनिरीक्षक
 पो.स्टे.भोकर

6. Complainant / Informant (तक्रारदार/माहिती देणारा):

(a) Name (नाव): बबन विठलराव वडेवार

(b) Father's/Husband's Name(वडील / पती चे

(c) Date/Year of Birth (जन्म तारीख/वर्ष): 1964

(d) Nationality (राष्ट्रीयत्व): भारत

(e) UID No. (यु.आय.डी. क्र.):

(f) Passport No.(पारपत्र क्र.):

Date of Issue (दिल्याची तारीख):

Place of Issue (दिल्याचे ठिकाण):

(g) Id details (Ration Card, Voter ID Card, Passport, UID No., Driving License, PAN)
ओळखपत्र विवरण (राशन कार्ड ,मतदाता कार्ड ,पासपोर्ट, यूआईडी सं., ड्राइविंग लाइसेंस, पॅन कार्ड)

S.No.(अ.)	Id Type (ओळखपत्राचा प्रकार)	Id Number (ओळखपत्राचा क्रमांक)
1		

(h) Address (पत्ता):

S.No.(अ. क्र.)	Address Type (पत्याचा प्रकार)	Address (पत्ता)
1	वर्तमान पत्ता	देशमुख गल्ली भोकर ता भोकर, भोकर, नांदेड, महाराष्ट्र, भारत
2	स्थायी पत्ता	देशमुख गल्ली भोकर ता भोकर, भोकर, नांदेड, महाराष्ट्र, भारत

(i) Occupation (व्यवसाय):

(j) Phone number (फोन नं.):

Mobile (मोबाइल नं.):

7. Details of known/suspected/unknown accused with full particulars (माहित असलेल्या /संशयित/अनोळखी आरोपीचा संपूर्ण पत्ता):

S.No. (अ.क्र.)	Name (नाव)	Alias (उर्फनाव)	Relative's Name (नातेवाईकाचे नाव)	Present Address (वर्तमान पत्ता)
1	MH 29 6680 च्या चालक नाव माहिती नाही			1. माहिती नाही , भोकर, नांदेड, महाराष्ट्र, भारत

8. Reasons for delay in reporting by the complainant/informant (तक्रारदार/माहिती देणा-याकडून तक्रार करण्यातील विलंबाची कारणे):

9. Particulars of properties of interest (संबंधीत मालमत्तेचा तपशील):

S.No. (अ.क्र.)	Property Category (मालमत्ता वर्ग)	Property Type (मालमत्ता प्रकार)	Description (वर्णन)	Value(In Rs/-) (मुल्य (रु. मध्ये))
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10 Total value of property (In Rs/-)-(चोरीस गेलेल्या मालमत्तेचे एकूण मुल्य (रु. मध्ये)):

11 Inquest Report / U.D. case No., if any (इन्क्वेस्ट अहवाल/ अकस्मात मृत्यू प्रकरण क्र., जर असल्यास):

S.No. (अ. क्र.)	UIDB Number (यु.आय.डी. बी.क्र.)
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12 First Information contents (प्रथम खबर हकीकत):

दिनांक 23/02/2021 जबाबमी बबन उर्फ यशवंता पि विठलराव वडेवार वय वर्ष ५५ व्यावसाय मजुरी रा देशमुख गल्ली भोकर ता भोकर जि नांदेड मोन 7744081051 समक्ष पोलीस स्टेशन भोकर येथे हाजर येवुन जबाब लिहुन घेण्यास सांगतो कि, मी वरील प्रमाणे असुन मला एक मुलगी दोन मुले असे असुन सह पत्नीक सह परिवार एकत्रच राहुन रोज मदरी करुन कुटुंबाचा उदरनिर्वाह भागवतो. दिनांक 23/02/2021 रोजी मी सायकाळी साडे सहा वाजण्याचे सुमारास भोकर येथील आंबेडकर चौकात नेहमी प्रमाणे थोबलो आसताना किनवट कडुन भोकर येतील बसस्थानका कडे जाणारे रोडने आंबेडकर चौकात वेळ अंदाडे 06.35 वाजण्याचे सुमारास किनवटकडुन ंणारा भरधाव वेगात ंणारा टम्पो क्र MH 29 6680 च्या चालकाने रोडच्या बाजुस असलेल्या एका ते वयो गटातिल पुरुष जातीच्या भिकारी अज्ञात ईसमास जोराची धडक दिल्याने सदर अज्ञात भिकारी ईसम हा गंभीर जखमी झाल्याने मी व तेथील जमलेल्या लोकानी अज्ञात भिकारी ईसमास उपचार कामी सरकारी

दवाखाना भोकर येथे नेले असता तेथील डक्टरानी त्यास तपासणी तो मरण पावला असल्याचे सांगितले आहे तरी आज दिनांक 23/02/2021 रोजी सायकाली 06.35 वाजण्याचे सुमारास भोकर येथील ऑबेडकर चौक येथे रोडच्या बाजुस उभे असलेल्या अज्ञात भिकारी वय अंदाजे 45 ते 48 पुरुष जातीच्या ईसमाल किनवट कट्टुन भोकर कडे येणार्या टम्पो क्र MH 29 6680 च्या चालकाने त्याच्या ताब्यातील वाहन हे हयगई व निष्कालजी पणाने भरधाव वेगात चालवून रोडच्या बाजुस असलेल्या भिकारी ईसमास जोराची धडक दिल्यानी तो अपघातात गंभीर जखमी होवून मरण पावला आहे त्याच्या मरणास टम्पो क्र MH 29 6680 चा चालक कारणीभूत ठरला आहे तरी सदर टम्पो क्र MH 29 6680 च्या चालका विरुध्द कायदेशिर कार्यवाही होणेस विनती आहे माझा वरील जबाब माझ्या सांगणे प्रमाणे संगणकावर टंकलिखित केला तो मला वाचवून दाखविला तो माझ्या सांगण्याप्रमाणे बरोबर व खरा आहे हा जबाब दिला सही

- 13. Action** Since the above information reveals commission of offence(s) u/s as mentioned at (केलेली कारवाई: बाब क्र. २ मध्ये नमूद केलेल्या कलमान्वये वरील अहवालावरून अपराध घडल्याचे.)
- (1) **Registered the case and took up the investigation:** (प्रकरण नोंदविले आणि तपासाचे काम हाती घेतले): VIKAS SHEKUJI PATIL(I (Inspector)) / POBN62686 or (किंवा)
- (2) **Directed (Name of I.O.)** (तपास अधिका-याचे नाव):
Rank (पद):
No.(क्र.): to take up the Investigation (ला तपास करण्याचे अधिकार दिले) or (किंवा)
- (3) **Refused investigation due to** (ज्या कारणामुळे तपास करण्यास नकार दिला):
 or (ज्या कारणामुळे तपास करण्यास नकार दिला)
- (4) **Transferred to P.S.**(गुन्हा दुसरीकडे पाठविला असल्यास त्या पोलीस ठाण्याचे नाव):
District (जिल्हा):
on point of jurisdiction (को क्षेत्राधिकार के कारण हस्तांतरित) .

F.I.R. read over to the complainant / informant, admitted to be correctly recorded and a copy given to the complainant / informant free of cost. (प्रथम खबर तक्रारदाराला/खबरीला वाचून दाखविली, बरोबर नोंदविली असल्याचे त्याने मान्य केले आणि तक्रारदाराला/खबरीला खबरीची प्रत मोफत दिली.)

R.O.A.C.(आर. ओ .ए .सी.)

- 14. Signature/Thumb impression of the complainant / informant.**(तक्रारदाराची/खबर देणा-याची सही/अंगठा):

01/01/01

- 15. Date and time of dispatch to the court** (न्यायालयात पाठवल्याची तारीख व वेळ):

Signature of Officer in Charge, Police Station (ठाणे प्रभारी अधिका-याची)

Name (नाम): VIKAS SHEKUJI PATIL

Rank(पद): I (Inspector)

No.(सं.): POBN62686

23/02/2021
 पो. २६. १०३३

दिगांबर पांडुरंग पाटील
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Attachment to item 7 of First Information Report (प्रथम खबरीतील मुद्दा क्र. ७ ला जोडपत्र):**Physical features, deformities and other details of the suspect/accused: (If known / (संशयित/आरोपीचे (माहित असलेल्या/पाहिलेल्या) शारीरिक वैशिष्ट्ये, व्यंग आणि इतर तपशील))**

S.No.(अ.क्र.)	Sex (लिंग)	Date/Year of Birth (जन्म)	Build (बांधा)	Height (cms.) (उंची)	Complexion (रंग)	Identification Mark(s) (ओळखीच्या खुणा)
1	2	3	4	5	6	7
1	पुरुष					चेचक के दाग: NO
Deformities/ Peculiarities	Teeth (दात)	Hair (केस)	Eyes (डोळे)	Habit(s) (सवयी)	Dress Habit(s) (पोषाखाच्या सवयी)	
8	9	10	11	12	13	
Language /Dialect (भाषा/बोलीभाषा)	Place Of (का स्थान)					Others (इतर)
	Burn Mark	Leucoderma (कोड)	Mole (तिल)	Scar (व्रण)	Tattoo (गोदण)	
14	15	16	17	18	19	20

These fields will be entered only if complainant/informant gives any one or more particulars about the suspect/accused.

(जर तक्रारदार/माहिती देणाने संशयित/आरोपीविषयी एक किंवा त्यापेक्षा अधिक तपशील दिल्यास फक्त यातील रकान्यांची नोंद घेतली जाईल.)

Y.P.P-50,003 6-2015-PA4*-(O) 75

G.R., G.D. No:733/33, dated 16-6-41 and

G.R.,II and L. G. D. No. 733/33, DATED 11-12-47

vide Surgeon General with the Govt. of Maharashtra, Bombay's
Letter No. BOM/1462/19937/1, DATED 4-7-62

**Memorandum of a Post-Mortem Examination held at RH BHOKAR Dispensary/
Hospital on the dead body of UNKNOWN age around 45 year of village unknown
Taluka UNKNOWN , District NANDED , by Dr. Dr. N. D. Kalaskar (MO)**

I. General Particulars-

1.

a. By whom was the corpse sent **P.I. BHOKAR**

b. Name of place (from which sent) **Patient was brought dead in RH BHOKAR**

c. Distance of place from which sent **'0'km**

2. By whom was the corpse brought? **Police R N KARAD ASI**

3. By whom identified? **1. Mr. BABAN URF YASHWANT P VITHALRAO BANDEWAR,
age 57 YEAR**

4. The date, hour and minute of its receipt **23/02/2021 6.40 PM**

a. The date, hour and minute of beginning post-mortem examination **11.45AM on 24-02-2021**

b. The date, hour and minute of ending post-mortem examination **12.45 PM on 24-02-2021**

5. Substance of accompanying report from police officer or magistrate, together with date of death, if known. Supposed cause of death or reason, for examination. **According to police inquest cause of death is due to RTA but to know the exact cause PM examination is called for.**


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6. If not examined at Dispensary or Hospital
a. Name of place where examined

b. Distance from Dispensary or Hospital **N.A.**

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

II. External examination

7. Sex, apparent age, race or caste. **Male, approximately, around 45 TO 48 yrs. of age**
Description of clothes and of **Hindu**
ornaments on the body **white coloured shirt and blue coloured pant with beared whitish discolored.**

8. Condition of the clothes

Whether wet with water stained with blood or soiled with vomit or focal matter. **shirt stained with blood**

9. Special marks on the skin such as scars, tattooing, etc., any malfunctions, peculiarities or other marks of identification. **dentition present**
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. **NA**

10. Condition of body-whether well nourished, thin or emaciated, warm or cold. **Mal nourished. cold**
11. Regard Mortis-well marked, slight or absent, whether present in the whole body or part only **present**
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 s/o decomposition**
13. Features-Whether natural or swollen, state of eyes, position of tongue; nature of fluid (if any) oozing from mouth, nostrils or ears. **Eyes partially open , not protruded
blood fluid oozing from both ear and mouth
Tongue in mouth not protruded**
14. Condition of skin-Marks of blood etc., in suspected drowning the presence or absence of cuts anserine to be noted. **Absent**
15. Injuries to external genitals indication of purging. **Absent**
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. **Both upper limbs extended at elbow
Both lower limbs extended at knee joint**
17. Surface wounds and injuries-Their nature, position, dimensions (measured) and directions to be accurately stated **1. occipital depressed skull fracture of size over occipital of size 5 cm *4cm *3cm deep
2.left shoulder abrasion and contusion of size 4cm*3cm*1cm deep**


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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 No. 17 & 18 are ante mortem injuries?

3. on anterior surface just at base of neck contused abrasion of size 4cm *3 cm*2cm

4. right hand abrasion and contusion noted of size 3cm *3cm

5. contused lacerated abrasion noted on left posterior aspect of hip 4cm *4 cm *2cm

Yes, Ante mortem

III. Internal Examination

19. Head-

i. Injuries under the scalp, their nature.
12

Brown with subcutaneous bleed

1. Haematoma seen in left parietal & occipital part 10 X

X 2cm

ii. Skull-Vault and base describe fractures, their sites, dimensions, directions etc.

Fracture noted mastoid temporal bone.

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. 3gm F. 2.75gm)

occipito parietal haematoma of size 5 X 5 diameter on both side

Haematoma in corpus callosum

20. Thorax-

a. Walls, ribs, cartilages

Intact

b. Pleura

(Contains fluids) oedema, intact

c. Larynx, Trachea and Bronchi

No any fracture, intact

d. Right Lung

Blackening of lung parenchyma

- | | |
|-----------------------|--|
| e. Left Lung | Noted bilaterally on lower pole petechial hemorrhage |
| f. Pericardium | Intact, congested |
| g. Heart with weight | Intact, congested |
| h. Large vessels | Intact |
| i. Additional remarks | No additional remark |

21. Abdomen-

- | | |
|---------------------------------------|---|
| Walls | Normal |
| Peritoneum | Intact |
| Cavity | Normal, Intact |
| Buccal cavity teeth, tongue & pharynx | Buccal cavity , tongue in between both alveolar/maxillary/mandibular. |
| Esophagus | Normal |
| Stomach & its contents | stomach contains rice particle |
| Small intestine & its contents | |
| Large intestine & its contents | Intact with semi digested food material. |
| Liver (with weight) and gallbladder | Intact, congested |
| Pancreas & Suprarenal | Intact, congested |
| Spleen with weight | Intact, congested |
| Kidneys with weight | Intact, congested |
| Bladder | Intact, congested |
| Organs of generation | Nil |

Additional remarks with where possible.
 Medical Officers deduction from the state
 of the contents of the stomach as to time
 of death and last meal


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 पो.स्टे. कोरगाव

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.

22. Spine and Spinal cord

Not any fracture seen

Opinion as to the cause probable cause of death.

Probable cause of death due to cardio pulmonary arrest due to hemorrhagic shock due to severe massive head injury associated with subdural & sub arachaurid hematoma in occipital region (head injury) due to road traffic accident

Dated 24/02/2021



(Signature)

Medical Officer
Rural Hospital, Bhokar.

No. MLC PM No. - 3/33 on 24/02/2021

1. Prace- Dispensary **RH BHOKAR**
Civil Hospital

Forwarded to the Police Sub Inspector, **PI BHOKAR** for
information with

Reference to his No. **CRN 78/2021** of **23/02/2021**

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

Viscera not preserved.



Civil Surgeon or M.M.

Medical Officer
Rural Hospital, Bhokar.

Copy forwarded with compliments to the Civil Surgeon,

for information

M.M.S. Officer

on

Seen & examined by the Civil Surgeon,

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(if any)

Remarks of the Civil Surgeon.



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