

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	Ramtirth Dist.Nanded
2	CR.NO./TAR No./SDE No.	28/2024 U/S 279,338, 304 (a) of I.p.c.r/w 184 m v act.
3	Date, Time and Place of the accident.	29/01/2024 at 19.30 hrs Degloor to Nanded road near Adampur Tq. Biloli dist. Nanded.
4	Name of the Injured / Deceased	Sabir sab Zahir Sab Shaikh age 68 years r/o Shelgaon Tq. Degloor dist. Nanded.
5	Name of Hospital to Which he/she was removed	Govt. .Hospital Nanded
6	Number of vehicles and type of the vehicle	TS 16 FE 8075 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.	Anil IrbaGaikwad age 31 years r/o Sagroli tq. Biloli dist. Nanded MH 26 2012005143 RTO Nanded
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Sayyad Azim Sayyad Chandsab r/o Ambedkar nagar chouk Bodhan tq. Bodhan dist. Nizamabad
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said insurance Company.	TATA AIG General insurance comp.ltd.
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	G-1715997190000 19/02/2024
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 Ramtirth
Dist. Nanded (M.S)

मी शेख अहेमद शेख शब्बीरसाब वय 38 वर्ष व्यवसाय ड्रायव्हर रा. शेळगांव (तमलुर) ता. देगलूर मोबा.नंबर - 7387707412

समक्ष पोलीस स्टेशन रामतीर्थ येथे हजर येऊन जबाब लिहण घेण्यास सांगतो की, माझे नाव वरील प्रमाणे असून मी वरिल ठिकाणी राहातो. मला एक मुलगा व दोन मुली आहेत. मला आई, दोन भाऊ असे असून माझे वडील दिनांक 30/01/2024 रोजी अपघातात मरण पावले आहेत.

दिनांक 29/01/2024 रोजी मी, वडील शेख शब्बीरसाब व इतर नातेवाईक असे वलीमा (रिशोपान) जेवणाचे कार्यक्रमास धामनगांव येथे जात होतो. माझे वडील हे चुलत भाऊ शेख चाँदपाशा शेख मैनोद्दीन यांचे मोटार सायकल (MH 26 BM 6432) वर पाठीमागे बसले होते. मी माझे नातेवाईकासोबत क्रुझर गाडीत समोर ड्रायव्हरचे बाजूला बसलो होतो. आम्ही सर्व त्या दिवसी वेळ सायंकाळी अंदाजे 06.30 वाजता हिप्परगा थडी येथुन आदमपुर, शंकरनगर मार्गे धामनगांव येथे जाण्यासाठी निघालो होतो.

आम्ही रात्री अंदाजे 07.30 वाजण्याचे सुमारास आदमपुर पाटी चे पुढे नरसी रोडवर अटकळी शिवाराती शिवम पेट्रोल पंपाचे समोर आलो असता, आमचे गाडीचे समोर चुलत भाऊ शेख चाँदपाशा यांची मोटार सायकल होती पाठीमागे वडील बसले होते. तेवढयात आमचे क्रुझर गाडीचे पाठीमागुन एक मोटार सायकल चालक त्यांची मोटार सायकल भरधाव वेगात चालवत येऊन, क्रुझर गाडीस ओव्हरटेक करुन आमचे समोर चालणारे माझ्या चुलत भाऊ चाँदपाशा यांचे मोटार सायकलला साईडने धडक मारला. त्यामुळे माझे चुलत भाऊ, वडील शब्बीरसाब व धडक देणारा मुलगा मोटारसायकल सह पडले ते मी आमचे गाडीचे लाईटचे उजेडात व पेट्रोल पंपाचे उजेडात पाहीलो. तेंव्हा आम्ही तात्काळ गाडी साईडला घेऊन गाडीचे खाली उतरुन रोडवर पडलेले जखमी वडील, शेख चाँदपाशा व धडक देणारा मुलगा यांना व दोन्ही मोटार सायकली हे रोडवरुन पंपाचे बाजुस ढाब्यावर सुरक्षीत ठेवलो. माझा चुलत भाऊ चाँदपाशा यांना किरकोळ मार लागला होता व वडील शब्बीर यांचे डोक्यास मुक्का मार लागुन कानातुन रक्त निघुन वडील बेहोश झाले होते. धडक देणारा मुलगा थोडे-थोडे बोलत होता, त्यास नांव विचारले असता तो अनिल गायकवाड रा.सगरोळी असे सांगुन तो नरसी येथे सासरवाडीला जात असल्याचे सांगितला. त्याचे मो.सा.नंबर TS 16 FE 8075 असी होती. थोडयाच अपघाताची माहिती कळताच त्या मुलाचे कोणीतरी नातेवाईक येऊन त्यास उपचार कामी घेऊन गेले. मी माझे वडीलास खाजगी गाडीने उपचार कामी मी, भाऊ शेख शादुल व माझे नातेवाईकांनी मिळुन देगलूर येथे व्यंकटेश्वरा हॉस्पिटल, देगलूर येथे नेलो. त्यांनी तपासुन वडीलास नांदेड येथे घेऊन जाण्यास सांगितले, त्यावरुन मी वडीलास ग्लोबल हॉस्पिटल, नांदेड येथे अॅडमीट केलो. तेथे उपचार सुरु असताना दिनांक 30/01/2024 रोजी रात्री अंदाजे 00.30 वाजता वडील शेख शब्बीरसाब शेख जाहीरसाब वय 65 वर्ष व्यवसाय शेती रा. शेळगांव (तमलुर) ता. देगलूर हे मरण पावले आहेत.

तरी दिनांक 29/01/2024 रोजी वेळ सायंकाळी अंदाजे 07.30 वाजता देगलूर ते नरसी रोडवर अटकळी शिवारात, आदमपुर पाटी/फाटयाचे जवळील शिवम पेट्रोल पंपाचे समोर रोडवर मो.सा.क्र. TS 16 FE 8075 चा चालक अनिल गायकवाड रा. सगरोळी ता. बिलोली याने त्याची मोटार सायकल हयगयीने व निष्काळजीपणे, भरधाव वेगात चालवुन चुलत भाऊ शेख चाँदपाशा शेख मैनोद्दीन यांचे मो.क्र. MH 26 BM 6432 ला पाठीमागुन धडक देऊन अपघात करुन चुलत भाऊ चाँदपाशा हा किरकोळ जखमी केला व माझे वडील शेख शब्बीरसाब शेख जाहीरसाब वय 65 वर्ष रा. शेळगांव (तमलुर) ता. देगलूर यांचे मरणास कारणभुत झाला आहे. तरी त्यांचे विरुध्द कारवाई होणेस विनंती आहे. आम्ही दुःखात असल्याने व वडीलांची 10 वा दिवस करुन येऊन तक्रार देण्यास उशिर झाला आहे.

माझा वरिल लिहीलेला जबाब माझ्या सांगणे प्रमाणे लिहीला असुन तो मी वाचुन पाहीलो बरोबर व खरा आहे.

समक्ष

हा जबाब दिली सही

Amjad
30/01/2024
रामतीर्थ

शेख अहेमद

दि. 10-02-2024

वे.सं. - 16.21

स्टे.सं. नोंद 14/2024

गु. र. नं. 28/2024 क. 300(A)

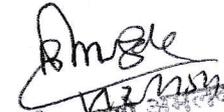
279, 337 IPK 184 MVHCL पुणे

ग. सप्तो. नि. आ. चांचे साक्षेभाळ

गुब्दा याबळ कसळ पुर्विल

तपास कामी PSP गरवाडे आ.

चांचे कडे देण्यात आले आहे


पोलीस ठाणे अंमलदार
C.I. स्टेशन तेथे

8. Description of the place of occurrence (Contd.):

घटनेच्या जागेचे वर्णन (पुढे चालू) :

सदर रॉड 312-दक्षिण असून तो जेवरी रॉड 20 फूट
 असून वीणाचे वरिण बाजूक उल्लेखन पश्चिमकुडी ह्याची असून त्याच्या
 पकयूर दुकान आहे. सदर पकयूर दुकान व पकयूर पंपाचे दरम्यान राडवर
 दोगांर कूड मरकजिड जावांगी रॉडवर पारिभाषण आशेवळ त्याची
 T.S 16 F.E 8075 ही मी/सा. अरबाव वंगण चालेवळ, पारिभाषण
 मंत्राची मी/सा. MH-26 BM 6432 व अडक दिवो आहुव सदर
 आपधान हावळ, मी/सा वय वयवळ मंत्र व मी/सा चालेवळ शक्य
 चांदपत्रा हे आपधान गंभीर अस्वी वळण उपचार दरम्यान मिळवा
 वयस मरण पावला आहे. सदर घटना दिनांक 29/11/2024 रोजी रात्री
 19:00 ते 19:30 वा.चे दरम्यान पेशेवळ पंपाचे समोरिल वरट चें पोळने
 उजडी व सळजिर, दुधर गाडीचे उजडी घरा घडली व
 सळजिर गंभीर घाहीवळी घाहीन. सदर विलावड व गुळवळ, वापरवळी
 आशेवळी मी/सा, T.S 16 F.E 8075 व मंत्र पारिभाषण वसुव
 जाव वयवळी मी/सा. MH-26 BM 6432 ही मी/सा वरिण आहे.
 सदर विलाव साईड इंडिटर, अंतर व आर साहीवळ वळडपडले
 आहेत.

सदर विलावची अक्षु. विना वसुव पुर्वेक पेशेवळ पंप. हावा
 व पकयूर दुकान आहे. आरक्षेवळ 20 फूट वळवळी इवरी रॉड, रॉडचे
 पश्चिमसु अस्वी जावेद शक्य. अरकळी मी/सा व चारवडी आहे.
 सदर विलावची Latitude 18.68089 व Longititude 77.59986
 असा आहे. सदर विलावचे फो व मी/सा व मी/सा वळन आहेत.

9.



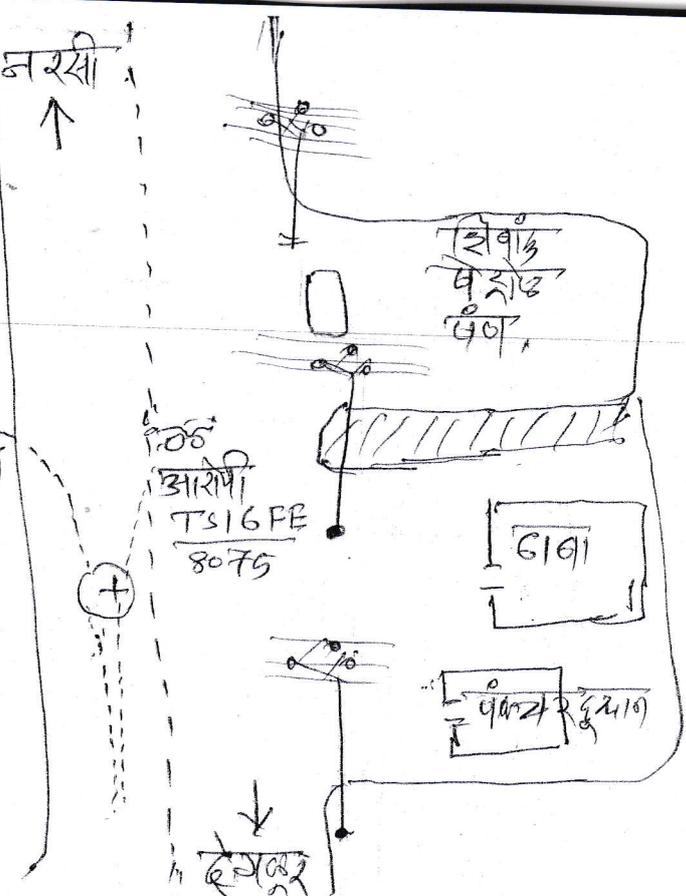
नकाशा :

Form : 2-D

MH-26 BM
6432
दि. 11 + मंत्रा

शिव जावेद
बेठ शेती
व. धाखात्र

altitude - 18.68089
longitude - 77.59986



10. Description of physical evidence from the scene of crime for the property recovered / seized for the purpose of investigation :

तपासकामी प्रत्यक्ष पुरावा म्हणून गुन्हाच्या जागेवरून मिळविलेल्या / जप्त केलेल्या मालमत्तेचे वर्णन :

- ① 50,000/- Honda Unicorn, काळ्या रंगाची मो/सा. TS16 FE 8075 नंबर असलेली जु. वा. कि. म.
- ② 35,000/- Honda, CD100, काळ्या रंगाची मो/सा. नंबर MH-26 BM 6432 असलेली जु. वा. कि. म.
- एकूण 85,000/-

11. घटनास्थळ पंचनाम्याची वेळ दिनांक : दि. 11/02/2024 वेळ 07.00 ते 07.45 वा. पर्यंत.

12. पंचाची नावे : पंचाच्या सहा :
- (1) शिव आकाश दिवाज साब वत्र 44 वर्षे धर्म शेती : Shivam
पत्ता : वा. हिप्परवा (वडी) ता. बिकोडी 8329 36 67 56
- (2) शिव जावेद मौल साब वत्र 44 वर्षे धर्म शुभकरवा. : Javeed
पत्ता : केसरडी ता. बिकोडी, 909611 4366.

दिनांक : 11/2/2024

तपासीक अंमलदाराची सही

नांव : शिवराज बरवाडे PS. शंभारिक
पदनाम : PSI, दिनांक : 11/2/2024

MLPM no :- 119/2024
Date :- 30/01/2024

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

Dispensary
Hospital

On the dead body of SHABIR S/O of Village
ZAHIR S/O SHAIKH CITY SHELGAON

Taluka DEGLOR District NANDED by Dr M.D Dake
Dr Anirudh Singh
Dr Krishnappa Rathod.

I. General Particulars—

1. (a) By whom was the corpse sent? P.H.C R.B Gutolwad [B.no 1130]
P.S - Shivajinagar, Nanded.

(b) Name of place from which sent.

(c) Distance of place from which sent.

Global hospital, Nanded.

2. By whom was the corpse brought?

3. By whom identified?

P.H.C R.B Gutolwad [B.no 1130]
P.S - Shivajinagar, Nanded.

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

30/01/2024 at 07:30 A.m

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

30/01/2024 at 08:00 A.m

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

30/01/2024 at 10:15 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 alleged history of deceased, while travelling on motorcycle from Shelgaon to Dhaman-gaon on Nanded - Degloor road, near Aadampur Takali, Tq. Degloor, dashed by unknown motorcycle from backside, severe injury to head, for treatment purpose, admitted to Global Hospital, Nanded on 29/01/2024 at 10:16 p.m., where died during treatment on 30/01/2024 at 00:18 Hours. Supposed cause of death due to head injury due to dashed by unknown motorcycle from backside.

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, 65 years.

Description of clothes and of ornaments on the body.

Body covered in black and white colour lining bedsheet and one multicolour bedsheet stained with blood at places, multi-colour sweatshirt, white colour shirt, black colour pant, Yellow colour thread tied around the neck with a silver colour metallic key attached to it, Hospital label on left foot.

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

Dry, intact 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, present in jaw, neck and upper limbs slightly present in other body parts.

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 back, 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

Eyes = closed

Pupils = Dilated and fixed

Mouth = closed

Tongue = Inside mouth

Blood oozing out from left side ear

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

Dry.

15. Injuries to external genitals.
Indication of purging.

No injuries to external genitals
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.

- ① Grazed abrasion present over parietal region, left side, of size 3cm x 1cm, obliquely placed, directed upwards and medially, red in colour
- ② Graze abrasion present over forearm, left side, posteriolateral aspect, of size 3cm x 2cm, obliquely placed, directed upwards, red in colour
- ③ Graze abrasion present over forearm, left side, posterior aspect, of size 6cm x 2cm, obliquely placed, directed upwards, red in colour

17. Surface wounds and injuries

—Their nature, position, dimensions (measured) and direction to be accurately stated—their probable age and causes to be noted.

- ④ Contusion present over forearm, left side, lateral aspect, situated near wrist, of size 4cm x 3cm, bluish in colour
- ⑤ Graze abrasion present over hand, left side, palmar aspect at the hypothenar eminence, of size 1cm x 0.5cm, obliquely placed, directed upwards and laterally, red in colour
- ⑥ Graze abrasion present over gluteal region, left side, medial part, of size 6cm x 1cm, obliquely placed, directed laterally, red in colour
- ⑦ Graze abrasion present over thigh, left side, posterior aspect, of size 1.5cm x 0.5cm, obliquely placed, directed laterally, red in colour

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).

- ⑧ Grazed abrasion present over leg, right side, posterior aspect, mid part, of size 8cm x 5cm, obliquely placed, directed downwards and medially, red in colour
- ⑨ Laceration present over foot, right side, plantar aspect, of size 0.5cm x 0.3cm x muscle deep, margins irregular, red in colour
- ⑩ Sutured wound present over foot, right side, plantar aspect, of length 2cm with 2 sutures in situ, situated 7cm below injury w. On removing sutures laceration of size 2.5cm x 1cm x muscle deep, margins irregular, red in colour

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

Intact, no evidence of fractures.

- ⑪ Puncture wound present over hand, right side, dorsal aspect, suggestive of therapeutic intravenous cannula mark, red in colour
- ⑫ Puncture wound present over hand, left side, dorsal aspect, suggestive of therapeutic intravenous cannula mark, red in colour

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

→ Yes, ante mortem.

III. Internal Examination—

19. Head—

- (i) Injuries under the scalp, their nature. Under scalp contusion present over temporal-parietal region, left side, of size 6cm x 4cm, dark red in colour, Temporalis muscle of the left side presented with underlying haemorrhage.
- (ii) **Skull**—Vault and base—describe fractures, their sites, dimensions, directions, etc. Linear fracture line, vertically placed over temporal bone of left side with temporal sutural fracture, then fracture line running downwards and medially towards the middle cranial fossa of left side, fracture margins irregular with infiltration of blood, red in colour.
- (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).

Meninges = intact

Brain = Intact, diffuse sub dural haemorrhage about 20 gm, diffuse sub arachnoid haemorrhage
 traumatic contusions present over right and left side temporal lobe along with base of right side parietal lobe.

20. Thorax—

- (a) Walls, ribs, cartilages ① Left side clavicle fracture present over junction of medial $\frac{2}{3}$ rd and lateral $\frac{1}{3}$ rd, fracture margins irregular and infiltrated with blood.
- (b) Pleura ② Rib fracture present over left side 1st to 6th rib in midclavicular line, anterior aspect, fracture margins irregular and infiltrated with blood.

↳ About 1 litre of red colour fluid in left pleural cavity.

- (c) Larynx, Trachea and Bronchi.

Intact, no foreign body.

- (d) Right Lung Intact, congested

- (e) Left Lung Shrunken, collapsed,

- (f) Pericardium Intact

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

- (h) Large Vessels Intact

- (i) Additional remarks Nil.

21. Abdomen --

Walls

Peritoneum

Cavity

} Intact and no free fluid.

Buccal Cavity, teeth, tongue and Pharynx.

Oesophagus

} Intact, no foreign body.

Stomach and its contents

About 50ml of brown colour fluid, no abnormal smell perceived mucosa intact

Small intestine and its contents.

Large intestine and its contents.

} Intact, partly filled with gases and faeces

Liver (with weight) and gall bladder.

Pancreas and Suprarenals

Spleen with weight

Kidneys with weight

} Intact and congested.

Bladder

Intact and empty

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.

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 not preserved.

Spine and Spinal Cord

Intact and not opened.

Opinion as to the cause
probable cause of death.

"Head injury with blunt trauma to chest."

[Signature]

[Dr. Krishnappa Rathod]

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[Dr. M. D. Dake]
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Dated

30/01/2024

(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. :- 119/2024

Date :- 30/01/2024

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

Forwarded to the Police Sub-Inspector Shivajinagar, Nanded

for information with reference to his No. _____ of _____ 20

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

[Signature]

[Dr. Anisudh Singh]
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[Dr. M.D. Dake]
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Copy forwarded with compliments to the Civil Surgeon.

for information.



M. M. S. Officer

Seen and examined by the Civil Surgeon.

on

2)

Remarks of the Civil Surgeon. (if any)

Civil Surgeon