

10 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	Dharmabad, dist.Nanded
2	CR.NO./TAR No./SDE No.	277/2024 U/S 281,106(1) Bhartiya Naya Shanhita-2023
3	Date, Time and Place of the accident.	25/09/2024 at 11.30 hrs Dharmabad To Basar Road Neyar farm Ramesh Goud Tq.Dharmabad Dist Nanded
4	Name of the Injured / Deceased	Rajaram Shivaji Sawant age 22 Year r/o Gortha Tq- Umari Dist Nanded
5	Name of Hospital to Which he/she was removed	Govt. Hospital Dharmabad Dist Nanded
6	Number of vehicles and type of the vehicle	MH 26 CA 2071 Motar 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.	Sunil Sahebrav Dhupalwad age 29 Year r/o Babhulgav Tq Dharmabad RTO Nanded --
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Sanjay Sahebrav Dhupalwad r/o Babhulgav Tq Dharmabad
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said insurance Company.	--
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	--
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 Dharmabad,
Dist. Nanded (M.S)

दोषारोप / अंतिम अहवाल**form-v-A**

(भारतीय नागरीक सुरक्षा संहितेच्या कलम १९३ अन्वये)

न्यायालयाचे नाव :- मा न्यायदंडाधिकारी साहेब, प्रथमवर्ग न्यायालय धर्माबाद.

१. राज्य : महाराष्ट्र जिल्हा : नांदेड पो.स्टे. : धर्माबाद पहिली खबर क्र./कार्यवाही क्र. २७७/२४ दि २५/०९/२०२४

२. दोषारोपपत्र क्र. :- ०४/२०२४

३. पाठविलेचा दिनांक : ०६/०१/२०२४

४. फ) अधिनियम : भा.न्या.संहिता

कलम - २८१, १०६(१)

फ) अधिनियम :

कलम :

५. अंतिम अहवालाचा प्रकार :- आरोपपत्र दाखल केले/पुराव्या अभावी दाखल केले नाही/तपास लागला

नाही/आरोपी मरण पावला. (योग्य ठिकाणी ✓ अशी खूण करा)

६. जर अंतिम अहवालाचा प्रकार :- घडलाच नाही/खोटी/ वस्तुस्थितीची चूक / कायद्याची चूक / अदखलपात्र/ दिवाणी स्वरूप

७. जर आरोपपत्र ठेवले तर :- तात्पुरते / मूळ / पुरवणी (योग्य ठिकाणी ✓ अशी खूण करा)

८. तपासणी अधिकाऱ्याचे नाव :- व्हि.एम.मुस्तापुरे :- पोहेकाँ/२००६ नेमणुक :- पो.स्टे.धर्माबाद

९. (अ) तक्रारदाराचे नाव :- शिवाजी सावंत वय-५० वर्षे व्यवसाय-शेती वडीलाचे नाव /पतीचे नाव
राजाराम सावंत कायमचा पत्ता:- गोरठा, ता.उमरी जिल्हा: नांदेड राज्य-महाराष्ट्र

१०. कोर्टात दोषारोपपत्र पाठविलेल्या आरोपीतांची यादी (फरारी सह असल्यास) आवश्यक असल्यास वेगळा कागद जोडावा

अ.क्र. १	आरोपीचे संपूर्ण नांव २	वय ३	राहण्याचे ठिकाण ४	नोटीस दिनांक ५	रिमांड दिनांक ६	शेरा ७
१)	सुनिल साहेबराव धुपलवाड	२९ वर्ष	रा.बाभुळगाव ता.धर्माबाद जि.नांदेड	दि.०६/१०/२०२४ चे १३.४१ वा. स्टे.डा. नं.१५ वर यांना कलम ३५(३) BNSS प्रमाणे नोटीस दिली.	-	-

११. पडताळलेल्या साक्षीदाराचे विवरण :-

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अ.क्र. १	संपूर्ण नांव २	जन्मतार ख/वर्ष ३	व्यवसाय ४	पत्ता ५	साक्षर करावयाच्या पुराव्याचा प्रकार ६
१	शिवाजी राजाराम सावंत	५० वर्षे	शेती	रा.गोरठा ता.उमरी	फिर्यादी
२	चंद्रप्रकाश सुभाषराव सावंत	५५ वर्ष	शेती	रा.गोरठा ता.उमरी	घटनास्थळ पंच
३	कैलास साधु सावंत	४५ वर्ष	शेती	रा.गोरठा ता.उमरी	घटनास्थळ पंच
४	जबाब-अविनाश रुपसिंग जाधव	४२ वर्ष	शेती	रा.वसंतनगरतांडा ता.उमरी	साक्षिदार
५	जबाब-ओमकार पि.शिवाजी सावंत	२१ वर्षे	शिक्षण	रा.वसंतनगरतांडा ता.उमरी	साक्षिदार
६	जबाब-देऊबाई शिवाजी सावंत	४४ वर्ष	घरकाम व शेती	रा.गोरठा ता.उमरी	साक्षिदार
७	जबाब-संध्या अविनाश जाधव	१६ वर्षे	शिक्षण	रा.वसंतनगरतांडा ता.उमरी	साक्षिदार
८	डॉ.श्रीकांत पाटील सर	४० वर्ष	वैद्यकिय अधिकारी	स.द.धर्माबाद	एम.ओ.
९	एम.एम.नागुलव्हाड	५४ वर्ष	सपोउपनि	पोस्टे धर्माबाद	दाखल करणार
१०	व्हि.एम.मुस्तापुरे	५६ वर्ष	पोहेकाँ/२००६	पो स्टे धर्माबाद	त.अंमलदार

१२.पहीली खबर खोटी असेल तर भा.न्या.संहितेच्या २१७/२४८ अन्वये केलेली किंवा करावयाची कार्यवाही नमुद करावी. :

१३. प्रयोगशाळा विश्लेषणाचे निष्कर्ष :-

१४. तपासाचे वेळी जप्त केलेल्या/परत मिळविलेल्या /अंतर्भूत असलेल्या मालमत्तेचा/वस्तूचा /दस्तवेजाचा
तपशील

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अ.क्र. १	मालमत्तेचे वर्णन	अंदाजीत मुल्य (रुपेयांत) ३	पो.ठा. मालमत्ता नोंदवही क्र. ४	कोणाकडून/कोठून परत मिळविली किंवा जप्त केली ५	विल्हेवाट ६
०१)	एक मोटारसायकल क्र. MH-26-CA-2071 हॉंडा शाईन कंपनीची १२५ सी.सी.ची काळ्या रंगाची त्यावर लाल पांढरे पट्टे असलेली अपघातामध्ये मोटारसायकलचे समोरील हेडलाईट तुटून फुटून दिसत आहे व समोरील चाक(रिंग) वाकलेला दिसत आहे.	40000	८०/२०२४	धर्माबाद ते बासर जाणारे रोडवर रमेश गौड यांचेशेता जवळील रोडवर घटनास्थळावरून जप्त	पो.स्टे.चे मोहरील यांचेकडे जमा

१५. प्रकरणाची थोडक्यात माहिती (आवश्यक असल्यास वेगळा कागद जोडावा) :

प्रति,

मा.न्याय दंडाधिकारी साहेब,

प्रथम वर्ग न्यायालय धर्माबाद यांचे सेवेत.

महोदय,

सादर विनंती की, मा.न्यायालयाचे स्थळ सिमेच्या हद्दीत पो.स्टे.धर्माबाद अंतर्गत धर्माबाद ते
बासर जाणारे रोडवर रमेश गौड यांचे शेताजवळ दि.२५/०९/२०२४ रोजी सकाळी ११.३० वाजताचे
सुमारास यातील मयत व साक्षिदार मुलगी असे मोटारसायकल क्र. MH-26-CF-3089 वर बसून
धर्माबादकडून बासरकडे जात असताना यातील कालम नं.१० मधिल आरोपीने त्याचे ताब्यातील
मोटारसायकल क्र. MH-26-CA-2071 हिरो हॉंडा शाईन हि हयगय व निष्काळजीपणाने भरधाव वेगात
चालवून मयताचे मोटारसायकलीस जोराची धडक देवून त्यास गंभीर जखमी करून त्याचे मरणास
कारणीभूत झाला आहे व साक्षिदार मुलगी कु.संध्या जाधव हिस पण जखमी करून स्वतःही जखमी
झाला आहे.

म्हणून त्यांचे विरुद्ध कलम-२८१,१०६(१) भा.न्या.संहिता प्रमाणे गुन्हा केल्याचा दोषारोप चार्ज
आहे.

form-V-C

टिप १) सदर गुन्ह्यामध्ये अधिक पुरावा उपलब्ध झाल्यास बी.एन.एस.एस. कलम १९३(९) प्रमाणे मा.न्यायालयात दाखल करण्याची परवानगी असावी.

१६. कलम १९३ चा सुचना फॉर्म :--- बजावला - दिनांक

१७. कोर्टाचा सी.सी. नंबर:-----

१८. कोर्टाचा निकाल :-----

१९. प्रभारी अधिका-याची सही
नांव - बाळासाहेब रोकडे
पो.नि.पो.स्टे. धर्माबाद

तपासक अमलदार सही
नांव - वि.एम.मुस्तापुरे
पोहेकाँ/२००६ पो.स्टे.धर्माबाद



particulars of accused persons charge-sheeted (use separate for each accused) आरोप पत्र ठेवल्या आरोपीचा तपसिल (प्रत्येक आरोपीसाठी स्वतंत्र कागद वापरावा):

(i) Name :- सुनिल धुपलवाड पडताळले किंवा whether verified :- होय

(ii) Father's/husband's name:- पित्याचे/पतीचे नाव - साहेबराव धुपलवाड

Date /Year of Birth (जन्मतारीख /वर्ष)- वय- २९ वर्ष Sex लिंग-पुरुष

(iii) Nationality राष्ट्रीयत्व - भारतीय

(iv) passport no:-- - Date of Issue:- (v) Place of Issue:---
पारपत्र क्रं. दिल्याची तारीख

(vi) Religion:- धर्म-हिंदु (vii) Whether SC/ST:-

(viii) Occupation (व्यवसाय):- मजुरी

Address(पत्ता):- रा.बाभुळगाव ता.धर्माबाद

(xi) * Provisional criminal no (तात्पुरता गुन्हेगार क्र.): - A-१

(xii) Regular criminal no (if known) नियमित गुन्हेगार क्र. (माहित असतल्यास):----

(xiii) * Date of Arrest (अटकेची तारीख):- दि-०६/१०/२०२४ रोजी वेळ १३.४१ वा.नोटीस

(xiv) * Date of release on bail (जामीनावर सोडल्याची तारीख):- ०६/१०/२०२४

(xv) * Date on which forwarded to court (न्यायालयाकडे पाठवल्याची तारीख) दि.----

(xvi) * Under Acts and Sections:- (कोणत्या अधिनियमांखाली व कलमाखाली)

कलम- २८१,१०६(१) भा.न्या.संहिता

(xvii) * Name(s) of bailers/sureties and Address(es):-----
जामीनदारांची नावे व पत्ता:

(xviii) Previous convictions with case references (प्रकरणाच्या संदर्भासह
पुर्वीची अपराधसिध्दी)

(xix) * Status of the accused (आरोपीतांची पावती) :- नोटीसवर सोडण्यात आले.

(xixi) Forwarded/Baileb by police /police Custody/Baileb by
court/InJudicial

(xixii) Custody/Absconding / proclaimed Offender/पुढे पाठवले /पोलीस

नोटीसवर सोडले /पोलीस कोठडी /न्यायालयानी जामीनावर सोडले /न्यायालयीन कोठडी /फरार

/ उद्घोषित अपराधी/



दि.25/09/2024

जबाब

मी, शिवाजी राजाराम सावंत वय 50 वर्ष व्यवसाय शेती रा.गोरठा ता.उमरी जि.नांदेड
मो.नं.9172308384

समक्ष पोलीस स्टेशनला हजर येवून लेखी जबाब घेण्यास सांगतो की, मी वरील ठिकाणचा राहणारा असुन मला दोन मुले 1) राजाराम शिवाजी सावंत 2) ओमकार पि शिवाजी सावंत व दोन मुली 1) पार्वतीबाई खंडु खानसोडे हिचे लग्न झाले असुन 2) जयश्री शिवाजी सावंत असे असुन मी शेती व्यवसाय करुन कुटुंबाची उपजिवीका भागवितो.

आज दि.25/09/2024 रोजी वेळ सकाळी 09.00 वा.चे सुमारास मी घरी हजर असताना माझा मुलगा नामे राजाराम शिवाजी सावंत वय 22 वर्ष व्य - शेती हा घरातुन बासरला जातो म्हणुन मोटार सायकल क्रं.MH 26-C-F-3089 या हिरो होंडा स्पेलेंडर मोटार सायकलवर बसुन घरातुन निघुन गेला.आम्हाला धर्माबाद पोलीसांकडुन माहिती मिळाली की, तुमचा मुलगा नामे राजाराम शिवाजी सावंत हा धर्माबाद ते बासर जात असताना त्याचे सोबत मुलगी नामे संध्या अविनाश जाधव वय 18 वर्ष व्य - शिक्षण रा.वसंत नगर तांडा गोरठा ता.उमरी असे मोटार सायकलवर जात असताना धर्माबाद ते बासर जाणा-या रोडवर रमेश गौड यांचे शेता जवळ वेळ 11.30 वाजताचे सुमारास मोटार सायकल क्रं.MH - 26 CA -2071 हिरो होंडा शाईन चा अज्ञात चालक हा त्याचे ताब्यातील वाहन हयगयी व निष्काळजी पणाने चालवुन मोटार सायकल क्रं.MH 26-C-F-3089 या हिरो होंडा स्पेलेंडर हिस समोरुन जोराची धडक दिली.त्यामध्ये मोटार सायकल चालक राजाराम शिवाजी सावंत हा गंभीर जखमी होवुन जागीच मरण पावला आहे.त्यानंतर अशी माहिती मिळताच आम्ही सरकारी दवाखाना धर्माबाद येथे येवुन पाहिलो असता तो सरकारी दवाखाना येथे पलंगवर जखमी होवुन मरण पावलेला दिसला.

तरी दि.25/09/2024 रोजी वेळ 11.30 वा चे दरम्यान माझा मुलगा नामे राजाराम शिवाजी सावंत वय 22 वर्ष व्य - शेती रा.गोरठा ता.उमरी जि.नांदेड हा घरातुन बासरला जात असताना अज्ञात वाहन चालकानी त्यांच्या ताब्यातील वाहनास हयगय व निष्काळजी पणाने भरधाव वेगात चालवून त्यास जोराची धडक देवून गंभीर जखमी करुन त्यांचे मरणास कारणीभूत झाला आहे.

तरी सदर अज्ञात वाहन चालकाला विरुध्द योग्य ती कायदेशीर कार्यवाही करण्यात यावी.
माझा वरील जबाब माझे सांगणे प्रमाणे संगणकावर टंकलिखित केला व तो मला वाचुन दाखविला तो बरोबर व खरा आहे.

समक्ष

(M) 100/100
A 32

पोलीस ठाणे अंमलदार
पो.स्टे.धर्माबाद जि.नांदेड

हा जबाब दिला सही



नि. रं. रं. शिवाजी

दिनांक
5.09.24
रोजी वेळ
11.43 वा
वे. 17 वर
ज. 28.1.
06 (1)
मा. न्या.
जिल्हा. प्रमाण
न्याय. प्रमाण
रा. पो. नि.
मा. न्या.
न्या. प्रमाण
मु. नि. प्रमाण
मा. नि. प्रमाण
10.20.06
मु. नि. प्रमाण
मा. नि. प्रमाण
दिनांक


Election Commission Of India
 भारत निर्वाचन आयोग
IDENTITY CARD
 ओळखपत्र

MT79/172/351762




Elector's Name : Sawant Shivaji
 मतदारचे नाव : सावंत शिवाजी
 Father's/Mother's : Rajaram
 Husband's Name :
 वडील/आई/पतिचे नाव : राजाराम
 Sex : M लिंग : पुं
 Age as on 1.1.1994 : 20
 1.1.1994 : गोजी वय :

Address / पत्ता : 28
 Goratha Ward No. 1
 Bhokar
 Nanded
 28
 गोठा वाड क्र :
 भोकर
 नांदेड
 28



Electoral Registration Officer
 मतदार नोंदणी अधिकारी
 For BHOKAR Assembly Constituency
 भोकर विधानसभा मतदारसंघा कार्यालय
 नांदेड

Date / दिनांक : 16.11.1994

This card may be used as an identity card under different Government schemes.
 हे पत्र शासनाच्या विविध योजनांसाठी ओळखपत्र म्हणून उपयोगात आणता येईल.

Date 25/09/24

To,

The Police Station,
Police Station,
Dharmabad.

This is for your information that

Mr./Mrs. Bajaram Shivaji Sawant

Age 28 yr Sex: Male / Female

Residence of _____ to _____

Admitted at / Referred by RURAL HOSPITAL, Dharmabad
on Dt. 25/09/24 Time 12:20 P for

RTA C Brought-Dead

Pt's MLC No. is _____

1118

Kindly do needful.

Thanking you

MO-9325333928

Yours

S. S. S.
Medical Officer
Rural Hospital, Dharmabad
R.H. Dharmabad.

Date 25/09/22

To,

The Police Station,
Police Station,
Dharmabad.

R. DHARMABAD
MLC No. 1119
Date 25/09/22

This is for your information that

Mr./Mrs. Sandhya Arinash Tadhar

Age 18 yr

Sex: Male / Female

Residence of Vasant Nagar Umaid

Admitted at / Referred by RURAL HOSPITAL, Dharmabad

on Dt. 12.15/2 Time 25/09/22 for

RTA - Head injury

Pt's MLC No. is 1119

Kindly do needful.

दि. 25.09.2022 कोली वेर
13.32 कोली वेर नाई 15 वेर
Thanking you

Sgt. ti
Yours

No-4325333928

MLC नॉ नॉर दूरेन का.
पो. नि. शतरेन थॉन दूरेन का.
पुनिक नोपुशी व दूरेन का.
कॉमि गिर MLC 2006 मुरता (कोली वेर) संपलदार
शॉन को दूरेन

Medical Officer
Rural Hospital, Dharmabad Dist. Nanded
R.H. Dharmabad.

कोली वेर संपलदार
पो. स्टे. धर्माबाद जि. नांदेड

Date 25/09/24

To,

The Police Station,
Police Station,
Dharmabad.

This is for your information that

Mr./Mrs. Sunil Sahebrao Dhupelwad
Age 35 yr Sex: Male / Female
Residence of Baburgaon to Dharmabad
Admitted at / Referred by RURAL HOSPITAL, Dharmabad
on Dt. 25/09/24 Time 12:20 for

RTA & Head injury
1120

Pt's MLC No. is

Kindly do needful.

दि. 25.9.2024 रोजी वेळ 13.37 वा
थे डा. नोट म. 15 वर MLC मी

Yours

मो- 7387409706
मोड ब्रेक मा पोलिस स्टेशन
मोड कादेशा करत पुढे
जोडकी व कायनाही शरीर
बि.ए.ए. 2006 मुरगापुर
वड 1301

S. P. Tiwari
Medical Officer
Rural Hospital Dharmabad Dist. Nanded
R.H. Dharmabad.
पो. स्ट. धर्माबाद जि. नांदेड

FORM - CRIME DETAILS FORM

घटनास्थळाचा पंचनामा/गुन्ह्याचा तपसील नमुना

1. राज्य-महाराष्ट्र, जिल्हा-नांदेड, पोलीस स्टेशन-धुमविक्रम, पोलीस ठाणे/कार्यवाही क्र. 277/2024 दिनांक 25/09/2024

2. अधिनियम व कलम :- कलम - 281, 106 (I) भारतीय न्याय संहिता

3. घटनेचे ठिकाण दाखविण्याचे :-

नांव :- शिवजी सावंत वडीलाचे/पतीचे नांव :- राजाराम सावंत
वय :- 50 वर्ष, धर्मा :- शेती जात :- मराठा मोबाईल नंबर :- 972308384
रा. :- गो. 281 तालुका :- उमरी जिल्हा :- नांदेड राज्य :- महाराष्ट्र

4. गुन्ह्याचा प्रकार (गुन्ह्याचे सर्व पद्धतीसह) :-

i) प्रधान शिर्ष :-

ii) प्रधान शिर्षचे वर्गीकरण :-

iii) पद्धती :-

मो. सा. क्र. MH-26-CA-2071 ज्या चालकाने त्याचे ताब्यासह
मोटरसायकल हांगाय व जिबळमिणे व मारून वेगाने
चालवून मयताचे मोटरसायकलसोबत जोराने धडक देवून
गंभीर जखमी करून मयताचे मरणाचे ठारपिण्ण झाले

iv) वापरलेली वाहने :-

मो. सा. क्र. MH-26-CA-2071 हिरो होंडा स्पेक्टर व मो. सा. क्र. MH-26-CA-2071 हिरो होंडा स्पेक्टर

v) केलेले वेवांतर/केलेली बत्तावणी :-

vi) वापरलेली भाषा/बोली भाषा :-

vii) विशेष वैशिष्ट्य-1 :-

विशेष वैशिष्ट्य-2 :-

विशेष वैशिष्ट्य-3 :-

viii) घटनेच्या ठिकाणाचा प्रकार :-

धुमविक्रम ते वासुदेव जागारे रोडवर बाळापूर शिवारति
रमेश गोड यांचे शेताजवळ रोड अपघात

ix) अंतर्भूत मालमत्तेचा प्रकार :-

1) :-

3) :-

2) :-

4) :-

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

अ. क्र.	संपूर्ण नांव	जन्म तारीख / वय	लिंग	राष्ट्रीयत्व	धर्म	जाती/ जमाती	व्यवसाय	पत्ता	दुखापत मंभीर/ साधी	साधन/ हत्यार
1	2	3	4	5	6	7	8	9	10	11
1)	राजाराम शिवाजी सावंत	22 वर्षे	पुरुष	भारतीय	हिंदू	मराठा	शिक्षण	रा. गोय्या ता. उमरी जि. नांदेड	शेड अपघातात मृत्यू	
2)	सैद्दा अविनाश जाधव	18 वर्षे	स्त्री	भारतीय	हिंदू	कन्नडा	शिक्षण	रा. वसंतराव ता. उमरी जि. नांदेड	शेड अपघातात जखमी	

6. गुन्ह्याचा हेतु :- मोटारसायकल हयागत व निवृत्तीपणाचे अवधी वेळीच याळवुन मयतास जोरपी धडड देवुन मोटार जखमी करुन मळोस कुठेचि ठेवुन

7. चोरीच्या/अतर्भुत मालमत्तेचा तपशील :-

8. घटनेच्या जागेचे वर्णन :-

आम्ही पंचाय वि. एम. मुस्तापुरे पोहेडा / 2006 पोस्टे धमबिळ येथी धमबिळ ते बसर नगरे रोडवर बाळापुर शिवाराजिहं रमेश गोंड यांचे शेताजवळीक रोडवर कोठेचुन ठोकविले की, पोस्टे धमबिळ गे. नं. 277/2024 - उल्हा 281, 106 (1) आ. न्या. सहिता मध्युळ घटनास्थळ पंचनामा करुन आहे अथ ठोकविल्याने आम्ही पंच समक्ष हजर आलो आम्चे समक्ष दिसल्यापरिस्थितीप्रमाणे घटनास्थळ पंचनामा ठेवा तो खालीलप्रमाणे

सदर घटनास्थळी गुन्ह्यासिद्ध कियेविजि शिवजी राजाराम सावंत वय- 50 वर्षे व्यवसाय. शेती, रा. गोय्या ता. उमरी हे घटनास्थळी हजर असुन त्यांनि सांगितले की दि. 25/09/2024 रोजी सकाळी 09:00 वाजताचे सुमारास मी घरी असतांना मुळगा राजाराम सावंत हा मोटारसायकल व. मम 28 CF 3089 वर बसुन बायल येथे जातो म्हणुन गेली नंतर धमबिळ पोलीसकुठुन माहिती मिळाली की, एमपा मुळगा बासरला जात असतांना त्याचे

/Continue

(3)

8. घटनेच्या जागेचे वर्णन (पुढे चालू) :-

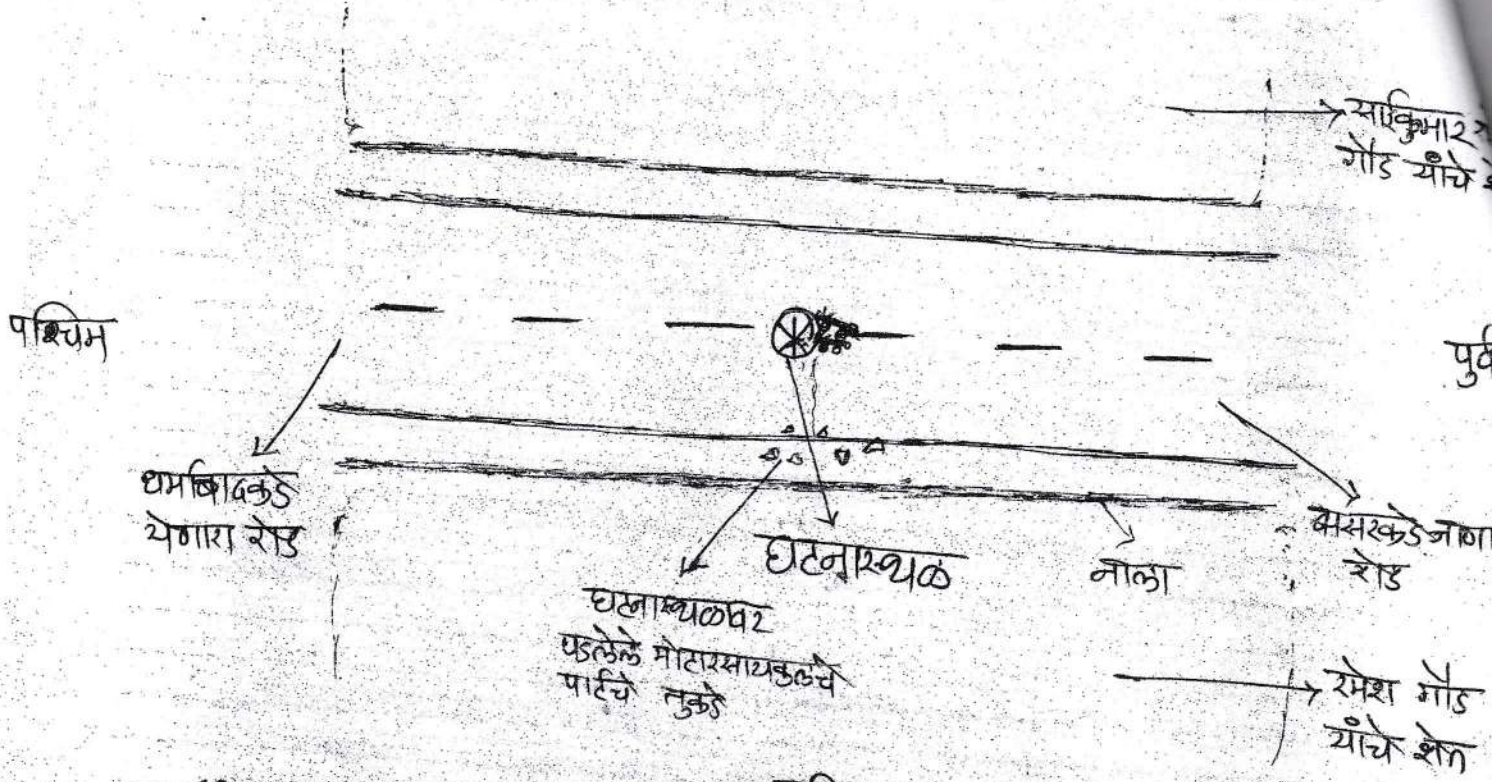
मोबिल मूळगी संध्या जवळ दिवण हेरि मोटारसायकलचे धमसिह
 ते कायल जाणारे रोडवर 11:30 वाजण्याचे सुमारास मोटारसायकल
 क्र. MH26 CA2071 हीरो हॉल शाईन च्या चालकाने जाणारे घडले
 पुढे मुळाचे डोक्यास माउल ठावून मरण पावला आहे अशी माहिती
 मिळाल्याची याबाबत दवाखाना धमसिह सध्या येथून पाहिले
 असता माझी मुलगी पळ्यावर मरण अवस्थेत दिलेली माझी
 मुलाचे मूळाम मोटारसायकल क्र. MH26 CA2071 च्या चालक डोक्यातून
 साळ आहे कोरे हल्लात यातून घटनास्थळ दाखविले.
 सदर घटनास्थळ पाहता धमसिह ते कायल जाणारे रोडवर
 काळपूर शिवारासोळ रमेश गॉड यांचे शेताजवळ धमसिह कुठून जाणारी
 मोटारसायकल क्र. MH26 CF3089 व कायलकुठून येणारी मोटारसायकल
 क्र. MH26 CA2071 यांचा डोक्या रोडचे मध्यभागी साईरी रेषा मारलेल्या
 मध्यभागी समोरामोर अपघात घडलेला जाणा आहे. सदर घटनास्थळाचे
 दक्षिण बाजूस मोटारसायकलचे हॅडलाईट, इंडिकेटर फुटून तुकडे पडलेले
 दिसत आहे. सदर मोटारसायकल क्र. MH26 CF3089 चे समोरचे रिंग
 वळलेले दिसत आहे. हॅडलाईट तुकडेले दिसत आहे व दुसरी मोटारसायकल
 क्र. MH26 CA2071 चे समोरचे हॅडलाईट व टायरचे रिंग वळलेले दिसत
 दिसत आहे. सदर घटनास्थळावर मोटारसायकल पडलेल्या पडलेली दिसत
 आहे. सदर घटनास्थळाचे काळपूर पाहता केळी असता घटनास्थळावर
 केळीची काळी तुकडे व हॅडलाईटचे समोरचे टायर पडलेले दिसत आहे.
 या घटनास्थळावर रक्त पडलेले दिसत आहे. घटनास्थळावरून आशेची
 मोटारसायकल क्र. MH26 CA2071 हि जणू कुठल्यान आली आहे.
 सदर घटनास्थळाचे चतुःसिमा पाहता पूर्व - वायव्य
 जाणारा रोड पश्चिम - धमसिह कुठून येणारा रोड दक्षिण - रोड
 लागत नाळा वायव्य रमेश गॉड यांचे शेता उत्तर - रोड वा
 लागत नाळा वायव्य साईरमाउ रमेश गॉड यांचे शेता
 सदर घटनास्थळ पंचनामा दि. 25/09/2024 रोजी केले
 18:00 वाजता सुरु केले केले 18:30 वाजता संपलेले

Lat - 18.89486

Long - 77.87535

9. घटनास्थळाचा नकाशा :-

उत्तर (4)



10. तपासकामी प्रत्यक्ष पुरावा म्हणून गुन्ह्याचे जागेवरून मिळविलेल्या / जप्त केलेल्या मालमतेच वर्णन :-

11. घटनास्थळ पंचनाम्याची दिनांक 25/9/2024 वेळ 18:00 ते 19:30 वार बुधवार

12. पंचाची नावे व संपूर्ण पत्ता आणि सही :-

- 1) पंचप्रकाश सुजाकाराव सावंत वय 55 वर्ष
व्य. शेती रा. गोरहा ता. अमरी 8007687496
- 2) कुंजस साधू सावंत वय 45 वर्ष
व्य. शेती रा. गोरहा ता. अमरी 8007137519

घटनास्थळ दाखविणा-याची सही

दिनांक



तपासीक अधिकारी सही :- MAHESH
नाव :- वि. ध. मुस्तापुरे
पदनाम :- पोहेडा/2006 पो.स्टे. धमखिळ

(O-127)-9-2008-5,00,000 Bks./4 lvs.--PA4*
 G. D., No. 733/33, dated 16-6-41 and
 L. H. and L. G. D., No. 733/33, dated 11-12-47,
 the Surgeon General with the Govt. of Maharashtra, Bombay's
 Letter No. FRM/1462/19357/1, dated 4-7-62.]

Memorandum of a post-mortem examination held at Rural Hospital Dharmabad Dispensary Hospital

on the dead body of Rajaram Shivaji of Village Goratha
 Sawant.
 City

Taluka Umri, District Nanded, by Dr. S. S. Pati.

I. General Particulars—

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

Police station Dharmabad

(b) Name of place from which sent.

R.H. Dharmabad.

(c) Distance of place from which sent.

Nil

2. By whom was the corpse brought?

Police - 108 Ambulance.
 C.P.O. No. 165 of 99 Surebhoirwad.

3. By whom identified?

Shivaji Rajaram Sawant. (father)

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

4:40 PM

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

4:50 pm

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

6:20 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 to know the exact cause of death, Post-mortem examination is required.

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 / 22 yrs / Hindu.

Description of clothes and of ornaments on the body.

- Yellow cotton shirt
- skyblue polyester Half T shirt.
- Red Kardora.
- Brown Macho Underpant - white stain (semen)
- Blood stained shirt & T shirt.

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

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

- Black mole on right side of chin

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—

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

Well nourished

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

- Well marked.
- Whole body - Hand, Legs, Jaw, Neck.

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
- No Lividity
- No Bullae.

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

- Bot eyes partially open - Half-open.
- Tongue Inside mouth.
- Oozing of blood from nose & ear.

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

- marks of blood on face & neck
- Dry skin.

15. Injuries to external genitals.
Indication of purging.

- No injury to external genitalia
- seminal ^{fluid} discharge present.

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.

Body supine position & All limbs straight.

17. **Surface wounds and injuries—**

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

- Abrasion over Left cheek below left eye 2cm x 1cm.

- Contusion over Temporo-occipital region of size 4cm x 3cm (Left side), 6cm from the midline.

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.

Fracture of Left Temporo-occipital bone of size 4cm x 3cm extending backwards.

- (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, 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).

— Large underscalp Hematoma over fronto-parieto Temporal region of size 6cm x 9cm.

— fracture Left Temporo occipital bone of size 3cm extending backward

— Large Subdural Hematoma over Temporo-parieto occipital region of size 8cm x 9cm

— Brain matter congested & edematous

20. Thorax—

(a) Walls, ribs, cartilages

Intact No injury

(b) Pleura

Intact No injury

(c) Larynx, Trachea and Bronchi.

Intact No injury

(d) Right Lung

— Intact No injury

(e) Left Lung

— Intact No injury

(f) Pericardium

— Intact No injury, No abnormal collection in pericardium.

(g) Heart with weight

— Intact No injury

(h) Large vessels

— Nil

(i) Additional remarks.

21. Abdomen—

- Walls - Intact - No injury
- Peritoneum - Intact - No injury
- Cavity - Intact - No injury - (Straw colour fluid present)
- Buccal Cavity, teeth, tongue and Pharynx. - Intact - No injury
- Esophagus - Intact - No injury
- Stomach and its contents - Intact - Pale mucosa - 200ml semidigested liquid.
- Small intestine and its contents. - Intact - Partially loaded with gases & food
- Large intestine and its contents. - Intact - Partially loaded with gases & food
- Liver (with weight) and gall bladder. - Intact - No injury - congested.
- Pancreas and Suprarenals. - Intact - No injury - congested.
- Spleen with weight - Intact - No injury - congested.
- Kidneys with weight - Intact - No injury - congested.
- Bladder - Intact - No injury - Empty.
- Organs of generations - No Abnormality / No injury.
- 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.

Intact No injury.

Opinion as to the cause
probable cause of death.

Death due to Cardio-Respiratory Arrest
secondary to complications of Head Injury.

Dated 25/09/2024/200

Spate
Medical Officer
(Signature)

Rural Hospital, Dharmabad Dist. Manded

*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.

LLC No. 1118

8

INO. 05/49

No. 25/09/2024 200

Place Dispensary
Civil Hospital

Rural Hospital
Dharmabad

200

Forwarded to the Police Sub-Inspector Police station Dharmabad.

for information with reference to his No. MLC No. 1118/2024 of 25/09/2024 200.

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

Viscera Not Preserved.

Spaty

Medical Officer
Rural Hospital, Dharmabad Dist. Nanded

Civil Surgeon or M. M. S. Officer

Copy forwarded with compliments to the Civil Surgeon,

for information.

M. M. S. Officer

Seen and examined by the Civil Surgeon,

on

200

Remarks of the Civil Surgeon,

(if any)

Civil Surgeon

GOVT. RURAL HOSPITAL, DHARMABAD, Dist. Nanded.

MEDICOLEGAL INJURY CERTIFICATE

M.C. No. 1119
IPD No. 5544

Office of the Medical Supt. Ch-1
Rural Hospital, Dharmabad

Name of the Patient Sandhya Avinash Jadhav

Age 18 yrs Sex Female R/O. Vasant. Nagar, Umri

Referred From Police Station Dharmabad
V.M. Hospital pure

Brought by P.C.B. No. 2006 on Dt. 25/09/2024 At 12:15 PM hrs.

No. 07/10/2024
Date: 07/10/2024

Identification Mark's

1) Black mole on Right. cheek.

2)

S.No.	Type of Injury	Part of Body Affected	Size	Age of Injury	Probable Weapon Used	Nature of Injury	Remarks
1.	Contusion	Right Frontotemporal region 5cm right + 8cm midline	4cm x 2cm	0-6 hrs	Hard & Blunt.	Simple.	CT. Brain + ORbit s/o. Brain Normal. Left periorbital soft tissue swelling
2.	Laceration	Right frontotemporal region 5cm right + 8cm midline	6cm x 1cm x 1cm	0-6 hrs	Hard & Blunt.	Simple.	- Admission Notes of GME Handled attached.
3.	Abrasion & Contusion	Left eyelid	2cm x 1cm	0-6 hrs	Hard & Blunt.	Simple.	

डि.स्ट.धर्माबाद जि.नांदेड

आवक क्र. 1486/5024

दिनांक: 21/10/2024

Medical Officer Spali 07/10/2024

Rural Hospital, Dharmabad, Dist. Nanded.

GOVT. RURAL HOSPITAL, DHARMABAD, DIST. NALAND MEDICOLEGAL INJURY CERTIFICATE

Office of the Medical Supt. CH-1
Rural Hospital, Dharmabad
MLC No. 1120
25/09/2024

Name of the Patient Sunil Sahebrao Dhupalwad
Age 29 yrs Sex Male Ro. Babhulgaon
Referred From Police Station Dharmabad on 25/09/24 at 12:20 P.M.
Brought by P.C.B. No. 2006 (V.M. Mustapur)

No. 20/10/2024
Date: 20/10/2024

Identification Mark's Black mole over abdomen.

S.No.	Type of Injury	Part of Body Affected	Size	Age of Injury	Probable Weapon Used	Nature of Injury	Remarks
1.	Contused lacerated wound	Right cheek	2.5cm x 0.5cm x 0.5cm	0-6 hrs	Hard & Blunt	Simple	Patient was referred to GMC Vishnupuri CT-scan done of S/O. Fracture of various bones of base of skull & face (multiple fractures) - Discharge card & CT report attached
2.	Contused lacerated (clw)	Left cheek	3cm x 0.5cm x 0.5cm	0-6 hrs	Hard & Blunt	Simple	
3.	Contused lacerated (clw)	Right Temporal Just above right eye	2cm x 0.5cm x 0.5cm	0-6 hrs	Hard & Blunt	Grievous	
4.	Blunt trauma	Head	Not possible				

Sunil
Medical Officer, Dist. Nanded
Rural Hospital, Dharmabad
20/10/2024



Regn. No. MH26CF3089 MH21601204

Regd. Owner: RAJARAM SHIVAJI SAWANT
S/D/W of: SHIVAJI SAWANT
Purpose: NEW
Regn. Date: 11/01/2023
Colour: BLACK-SILVER STR
Fuel: PETROL
Vehicle Class: M-Cycle/Scooter - MT
Body Type: SOLO WITH PELLION
Manufacturer: HERO MOTOCORP LTD
Chassis No.: MBL1AW128N4M32631
Engine No.: HA11EYMM31010
Model No.: SPLENDOR+ 335 SL
Hypothecated To: RTO NANDED
Manufacturing Dt.: 12/2022
Seat Capacity: 002
Stand Capacity: 00
Tax Paid Up To: LTT
Regd. Validity: 10/01/2038
Address: UMRI RO SITANAGAR TANDA TO UMRI NANDED
Nanded MH 431805

Unladen Wt: 000112
Cubic Capacity: 000097
Wheel Base: 001236
R.L.W: 000242

RTO NANDED
Issuing Authority

Signature Of Issuing Authority

Two Wheeler Policy- Bundled- 5 year Act only and 1 year Own Damage

MAGMA HDI
General Insurance Company Ltd.Policy No.
P0023200002/4113/505503Issued at
Magma HDI General Insurance Company Ltd. Magma HDI
General Insurance Company Ltd.
2nd Floor, Ambar, 22/B, Tilak Nagar (Nawab Area), House No
736, Nagpur - 440010
Tel: 1800 266 3202*
customercare@magma-hdi.co.in
RSA Toll Free Number : 18003098618HERO INSURANCE BROKING INDIA PVT LTD.
IRDA Registration No.: 649
Toll-Free No.: 1800 102 4376
264, Okhla Ind. Estate, Phase-III, Delhi-110020

Insured		Business/Profession		Address of The Insured		TP Valid From	TP Valid To	
Mr RAJARAM SHIVAJI SAWANT		Self Employed		R/O SITANAGAR TANDA, TQ. UMRI, UMRI, NANDE D Nanded MAHARASHTRA 431805		11-01-2023 14:55:40	Midnight of 10-01-2028	
Vehicle Regn No.		Engine No.		Chassis No.		Year of Mfg	Cubic Capacity	GSTIN No. (Customer)
New		HA11EYN4M31010		MBLHAW128N4M32631		2022	97	
Declared Value (IDV) of Vehicle		Side Car IDV		Non-Electrical Accessories IDV		Electrical Accessories IDV	CNG/LPG/Bi-Fuel IDV	Total IDV
69698.00		NA		0.00		0.00	0.00	69698
Place of Regn.		Body Type		HP/Lease/Hire-Purchase Agreement With		Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Premium
Nanded		Solo					2	6970.00
Section A								
Basic OD Premium				1168.00		Basic Third Party Liability		
Non-Electrical-Fitting Premium				0.00		TPPD Discount		
Electronic & Electrical Accessories				0.00		Total		
Bi-Fuel Kit				0.00		CNG/LPG/Bi-Fuel Kit		
Geographical Extension				0.00		Geographical Extension		
ND Cover				174.00		Add		
RSA				338.00		Compulsory PA Cover (Owner Driver)		
Less				0.00		Optional PA Cover(Un Named Passenger)		
Handicapped Discount				0.00		Optional PA Cover(Un Named Driver)		
For Anti-Theft Discount				0.00		Legal Liability Cover (Paid Drivers, Cleaners)		
NCB				0.00		Legal Liability Cover (Per Licensed Passenger)		
Total Own Damage Premium(A)				1680.00		Total Liability Premium (B)		
						Total Premium (A + B)		
						For any other extra		
						CGST @ 9.00%		
						SGST @ 9.00%		
						Gross Premium		
						3851.00		
						0.00		
						3851.00		
						0.00		
						0.00		
						375.00		
						0.00		
						0.00		
						0.00		
						4226.00		
						5906.00		
						0.00		
						532.00		
						532.00		
						6970.00		

1.RegistrationNo.:149||2.CINNo.:U66000WB2009PLC136327|| GSTIN No.:27AAGCM1685C1ZJ ||UIN No.-IRDAN149RP0006V01201819||IRDAN149RP0006V01201819/A003

OD Policy Period 11-01-2023 To 10-01-2024 11-01-2024 To 10-01-2025 11-01-2025 To 10-01-2026 11-01-2026 To 10-01-2027 11-01-2027 To 10-01-2028

IDV Rs. 15 lakhs. 11-01-2023 To 10-01-2024 11-01-2024 To 10-01-2025 11-01-2025 To 10-01-2026 11-01-2026 To 10-01-2027 11-01-2027 To 10-01-2028

CPA Policy period 11-01-2023 To 10-01-2024 11-01-2024 To 10-01-2025 11-01-2025 To 10-01-2026 11-01-2026 To 10-01-2027 11-01-2027 To 10-01-2028

LIMITATIONS AS TO USE: The Policy covers use of the vehicle for any purpose other than: a) Hire Or Reward b) Carriage of goods (other than samples or personal luggage) c) Organized Racing d) Pace Making e) Speed Testing f) Reliability Trials g) Any purpose in connection with Motor Trade.

DRIVER: Any person including insured: Provided that a person driving holds an effective driving licence at the time of the accident and is not disqualified from Holding or obtaining such a licence. Provided also that the person holding an effective Learner's Licence may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

LIMIT OF LIABILITY: Limit of the amount of the Company's liability under the Section II-I(i) in respect of any one accident as per M.V. Act 1988. Limit of the amount of the Company's liability under Section II-I(ii) in respect of any one claim or series of claims arising out of one event : Upto Rs - 100000/

IMPORTANT NOTICE: The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY'

We certify that the policy to which the certificate relates as well the certificate of insurance are issued in accordance with this provisions of Chapter X & XI of M.V. Act 1988

Broker : Hero Insurance Broking India Pvt. Ltd.

Premium of Rs. 6970.00 Received Vide Cash/Cheque No. CASH

Dated Nominee Name SHIVAJI

Drawn on Nominee Age 55

Acknowledgement 11-01-2023 Nominee Relation Father

On behalf of Magma HDI General Insurance Co Ltd.

FOR RENEWALS CONTACT: RIDWELL MOTORS Ph.No- 02462-234092

11-Jan-2023 Date & Signature of proposer ZILLA PARISHAD BLDG.NANDED

Dealer's Stamp & Signature

: Received with Thanks Rs 6970.00 from Mr RAJARAM SHIVAJI SAWANT as premium against the money receipt no 02POL2701230009211

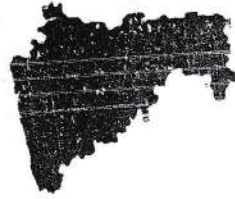
Regd. & Head Office : DEVELOPMENT HOUSE, 24 Park Street, Kolkata - 700016, Equinox Business Park, Tower 3, 2nd floor, Unit Number 1B & LBS Marg, Kurla (West), Mumbai - 400070, Maharashtra

For further information about motor insurance policy please also visit www.irdai.gov.in >> Grievances >> Policyholder Handbooks

The policy wording with detailed terms, conditions and exclusions are available on our website: https://www.magmahdi.com



MAHARASHTRA STATE GOVERNMENT
CERTIFICATE OF REGISTRATION



Form 23A

Regn. No. MH26CA2071

14114354428

Regd. Owner SANJAY SAHIL PRAO DHUMPALWAD
S/D/W of SAHEBRAO DHUMPALWAD
Purpose NEW / HPA
Regn. Date 27/12/2021
Colour BLACK
Fuel PETROL
Vehicle Class M-Cycle/Scooter - NT
Ei dy Type SWP
Manufacturer HONDA MOTORCYCLE AND SCOOTER
Chassis No. IF6AJC856HMD221368
Engine No. JC85ED0462218
Model No. SHINE DRUM
Hypothecated To LOK SUVIDHA FINANCE LIMITED
Manufacturing Dt. 08/2021
Seat Capacity 002
Stand Capacity 00
Tax Paid Up To LTY
Regd. Validity 26/12/2036
Address BABULGAY YETALA TG DHARMABAD NANDED
Nanded MH 431809



Unit/ton Wt 000114
Cubic Capacity 000124
Wheel Base 001265
R.L.W 000284

RTO NANDED
Issuing Authority

Signature Of Issuing Authority



GST Invoice No.: 3397346272608
DATE: 15/12/2021
PAN: AABCC6633K
SAC Code: 997134
SAC Description: Motor vehicle insurance services

CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LTD.
ADDRESS: ANDHERI
UNIT NO.1, 6TH FLOOR, SOLITAIRE CORPORATE PARK, 161, GHATKOPAR LINK
ROAD,
CHAKLA, ANDHERI (E), MUMBAI 400093
ANDHERI H.O
CITY: MUMBAI STATE: MAHARASHTRA
GSTIN: 27AABCC6633K1ZJ

Business Location: NANDED CIE
Policy Number: 3397/60172220/000/00
Customer Code: 1017242219500001
Cover Note No: 0
Policy Type: Package - Two Wheeler Policy

Name & Communication Address:
SANJAY SAHEBRAO DHUMPALWAD
BABULGAV YETALA TQ DHARMABAD
DHARMABAD S.O, NANDED, MAHARASHTRA, PIN - 431809
Mobile- 8485855332, Landline- -
Name and Registration Address:
BABULGAV YETALA TQ DHARMABAD
DHARMABAD S.O, NANDED, MAHARASHTRA PIN - 431809
Mobile- 8485855332, Landline- -
Geographical Area: India
Business or Profession: Individual

Certificate Number: 3397/60172220/000/00
Period of Insurance: From 14/12/2021 20:05 hours to midnight on 13/12/2026
PARTICULARS OF THE VEHICLE INSURED
Registration Mark: NEW
Year of Mfg: 2021

Date of Registration: 14/12/2021
Make: HONDA
Model: SHINE DRUM
Type of Body: SOLO
Fuel Used: PETROL
Cubic Capacity: 124 K.Watt: 0
Gross Vehicle Weight (GVW): -
Public/Private Carrier:-
Registration Mark (Trailer):
Contract No:-
Chassis No.
(Trailer):
Total Seating Capacity Including
Driver: 2
Driver: 1
Cleaner:-
Conductor:-
Driver: 2
Capacity: 2
IDV (Insured Declared Value)

IDV (Insured Declared Value)
1st Year: 71231
2nd Year: 0
3rd Year: 0
4th Year: 0
5th Year: 0
Value of Chassis (Rs): 0.00
Value of Body (Rs): 0.00
For Vehicle (Rs): 71,231.00
For Trailer (Rs): 0.00
Non-Electrical Accessories (Rs): 0.00
Value of CNG/LPG Kit (Rs): 0.00
Electrical/Electronic Accessories (Rs): 0.00
Period of Insurance
Start Date: 14/12/2021
End Date: 13/12/2022
14/12/2022
13/12/2023
14/12/2023
13/12/2024
14/12/2024
13/12/2025
14/12/2025
13/12/2026

Period Of Insurance				A1. OWN DAMAGE						A2. ADD-ON COVERS (BENEFITS)						B. LIABILITY						C. PERSONAL ACCIDENT COVERS							
				1st year	2nd year	3rd year	4th year	5th year	Total					1st year	2nd year	3rd year	4th year	5th year	Total					1st year	2nd year	3rd year	4th year	5th year	Total
				Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)					Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)					Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)	Premium (Rs)
Basic OD				1194	0*	0*	0*	0*	1194	Full Depreciation Waiver Cover Bundled				285	0	0	0	0	285	Basic TP				657	657	657	657	657	3285
Own Damage Premium				1194	0	0	0	0	1194	Chola Value Added Services - Two Wheeler Package Policy Bundled				150	0	0	0	0	150	TPPD Discount				657	657	657	657	657	3035
TOTAL (A1)				1134	0	0	0	0	1134	TOTAL ADD-ON-COVERS PREMIUM (A2)				435	0	0	0	0	435	TOTAL PREMIUM (B)				657	657	657	657	657	2925
PA for owner driver				1500000						TOTAL PREMIUM (C)				325	650	650	650	650	2925	CGST (9%)				325	650	650	650	650	7529
TOTAL (A1+A2+B+C)														2551	1307	1307	1307	1307	1307	677.50									
CGST (9%)																				677.50									
SGST (9%)																													
IGST (0%)																													

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CONSIDERATION

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CONDITIONS AS TO USE: The Policy covers use of the vehicle for any purpose other than: a) Hire or Reward b) Carriage of goods (Other than parcels or personal luggage) in connection with any trade or business or use for any purpose in connection with motor trade c) Motorized racing d) Pace making e) Speed Testing f) Reliability Trial g) Tuition h) Use only with side car if attached.

As per Sec 147 of MV Act issued policy the premium received only to an extent of liability fixed by IRDA/Central Govt

Sec 150 (2) (b) that the policy is void on the ground that it was obtained by, nondisclosure of any material fact or by representation of any fact which was, false in some material particular;

i.Or
ii.(c) that there is non-receipt of premium as required under section 64VB of, the Insurance Act, 1938.

3.No Application for compensation shall be entertained unless it is made within 6 Months from the date of occurrence of the Accident

4.No Sum shall be payable by an Insurer in case a person driving the vehicle does not have a valid driving license or is under the influence of Alcohol or Drug.

DRIVER CLAUSE: Any person including insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules 1989.

LIMITS OF LIABILITY: Under Section II - 1(i) of the Policy - Death or bodily injury such amount as is necessary to meet the requirements of the Motor Vehicle Act, 1988. Under Section II - 1(ii) of the Policy - Damage to Third Party Property - Rs.6,000.00 P.A. Cover for the Owner cum Driver Under Section III (CSI)- Rs.15,00,000.00

Compulsory Deductibles Under Section 1: Rs.100 Per claim
Voluntary deductibles under Section 1 Rs.0 Per claim

Subject to I.M.T. Endt. Nos. and Memorandum: 7.

Coverage Under this policy is subject to realisation of premium cheque(s). In case of dishonor of cheque(s), no separate intimation will be given and the policy stands cancelled from inception.

Product Plan:

Applicable benefits:

The policy wording with detailed terms, conditions, warranties, exclusions and the list of Ombudsman details are available on our website www.cholainsurance.com.

Date and Signature of the proposal 14/12/2021: In witness where of this policy has been signed in lieu of the Cover Note No.:- Date:-

Warranties: Warranted that NCB under this Policy is based on representation regarding NCB and absence of claim under the previous Policy.If the information be found incorrect or false in any aspect, this Policy shall be void ab initio and no benefit shall be payable by the company.

This policy has been issued upon declaration by the Assured that a valid Pollution Under Control (PUC) Certificate is held on the date of commencement of the Policy.

As per GR 36A - PA for Owner driver refers to the Owner of the insured vehicle holding an effective driving licence.

* This refers to NIL OD coverage for the period.

No Claim Bonus will only be allowed provided the policy is renewed within 90 days of the expiry date of the previous policy. No claim bonus is applicable at the end of the policy period.

Financier Name & Address: LOK SUVIDHA FINANCE LIMITED,NA

Intermediary Name: CHOLA INSURANCE DISTRIBUTION SERVICES PRIVATE LIMITED

Contact No: 7767801698

Code: 200572295173

Note: The Motor Policy Schedule cum Certificate of Insurance is an important document issued based on your declaration. We request you to verify the details and ensure that everything is in order. In case of any discrepancies, please contact us within 15 days from the date of issuance of policy.

Place: CHENNAI Date:15/12/2021 Receipt No:

For Cholamandalam MS General Insurance Company Ltd.

Stamp: Nanded 431604

Duly Constituted Attorney(s)

Receipt Date:

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule and also as per Notification No. 13/2020-CT dated 21-03-2020. This policy schedule shall be in lieu of Tax Invoice and hence no separate GST invoice required in compliance with Rule 54(2) of CGST Rules, 2017. Consolidated Stamp Duty Paid Vide G.O. Rt No.322, Commercial Taxes and Registration (J1) Department, Tamil Nadu dated 09/09/2021.

I/We hereby certify that the policy to which this certificate relates as well as this certificate of insurance are issued in accordance with the provisions of Chapter X and Chapter XI of the Motor Vehicles Act, 1988.

In the event of a claim under Compulsory personal accident cover (CPA), the intimation of the claim to the Insurer shall be within 30 days of its occurrence

IMPORTANT NOTICE: The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988, is recoverable from the insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY".

For Information/Claims: Contact Toll Free Helpline at 1800 208 5544; SMS "CHOLA" to 56677; For CARE contact 1800 103 5354;

E-mail: customercare@cholams.murugappa.com; www.cholainsurance.com

Note: UIN for this product and the related add-on covers availed under this policy are as mentioned in the attached sheet, which forms part of the policy schedule.

Whether tax is payable under reverse charge basis - No.

Cholamandalam MS General Insurance Company Ltd.

Regd.&Head Office:Dare House,2nd Floor,No.2,N.S.C Bose Road, Chennai-600001, India

CIN: U66030TN2001PLC047977 | IRDAI Reg. No. 123

Product Name : Motor Two - Wheelers Policy Bundled