

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	Bhokar, dist.Nanded
2	CR.NO./TAR No./SDE No.	14/2025 U/S 281,106, 125(a) Bhartiya Naya Shanhita-2023
3	Date, Time and Place of the accident.	12/01/2025 at 07.00 hrs Somthna To Kine Road near Paki busstand Tq Bhokar Dist Nanded.
4	Name of the Injured / Deceased	Kailas Baba Jadhv age 36 Year R/o Maldari Tanda Tq Bhokar Dist Nanded.
5	Name of Hospital to Which he/she was removed	Govt. Hospital Bhokar Dist Nanded
6	Number of vehicles and type of the vehicle	MH -26-Bs- 7196 Motar Cycal
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.	Vishnu Ram Jadhav age R/o Somthana busstand Tq Bhokar Dist Nanded. RTO Nanded MH 26 25170017257
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Vishnu Ram Jadhav age R/o Somthana busstand 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.	Shriram City union Fianance . Ltd Pune
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	3005/47284286/10316/000
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 Bhokar
Dist. Nanded (M.S)

FIRST INFORMATION REPORT

(Under Section 173 B.N.S.S)

प्रथम खबर अहवाल

(कलम बी एन एस एस १७३ च्या अंतर्गत)

1. **District (जिल्हा):** नांदेड

P.S.(ठाणे): भोकर

FIR No.(प्रथम खबर क्र.): 0014

Year (वर्ष): 2025

Date and Time of FIR (प्र. ख. दिनांक आणि वेळ): 12/01/2025 13:44

2. S.No. (अ.क्र.)	Acts (अधिनियम)	Sections (कलम)
1	भारतीय न्याय संहिता (बी एन एस), 2023	281
2	भारतीय न्याय संहिता (बी एन एस), 2023	125(a)
3	भारतीय न्याय संहिता (बी एन एस), 2023	125(b)
4	भारतीय न्याय संहिता (बी एन एस), 2023	106

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

1. **Day(दिवस):** रविवार

Date From (दिनांक पासून): 12/01/2025

Time Period पहर 3

Date To (दिनांक पर्यंत): 12/01/2025

(कालावधी):

Time From (वेळेपासून): 07:00 बजे

Time To (वेळेपर्यंत): 07:00 बजे

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

Date (दिनांक): 12/01/2025

Time (वेळ): 13:00 बजे

(c) **General Diary Reference (रोजनामचा संदर्भ):**

Entry No. (नोंद क्र.): 017

Date & Time (दिनांक आणि वेळ): 12/01/2025 13:37 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):**

पूर्व, 20 किमी

Beat No. (बिट क्र.):

(b) **Address (पत्ता):** सोमठाणा ते किनी जाणा-या रोडवरी, पाकी गावाचे बसस्टॅंड ता 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)):

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

- (a) Name (नाव): अर्जुन कैलास जाधव
 (b) Father's/Husband's Name (वडील / पती चे नाव):
 (c) Date/Year of Birth (जन्म तारीख/वर्ष): 2006
 (d) Nationality (राष्ट्रीयत्व): भारत
 (e) UID No. (यु.आय.डी. क्र.):
 (f) Passport No. (पासपोर्ट 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.क्र.)	ID Type (ओळखपत्राचा प्रकार)	ID Number (ओळखपत्राचा क्रमांक)
1		

(h) Address (पत्ता):

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

(i) Occupation (व्यवसाय):**(j) Phone number (फोन नं.):**

Mobile (मोबाइल नं.): 91-7972311426

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

S.No. (अ.क्र.)	Name (नाव)	Alias (उर्फनाव)	Relative's Name (नातेवाईकाचे नाव)	Present Address (वर्तमान पत्ता)
1	विष्णु पिता राम जाधव			1. मालदरी ता भोकर, 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.
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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):

सादर विनंती की, वर नमुद तारीख वेळी व ठिकाणी यातील आरोपी विष्णु पिता राम जाधव व मयत कैलास जाधव असे मोटारसायकल क्र. MH26BS7196 ने भोकर ला जात असतांना आरोपी विष्णु जाधव यांचे ताब्यातील मोटारसायकल ही भरघाव वेगात व हयगई निष्काळजीपणे चालवुन रोडच्या बाजूच्या खड्यात पडुन वडिल नामे कैलास बाबा जाधव वय 38 वर्ष घंदा शेती रा. मालदरी ता. भोकर हे गंभीर जखमी होउन ते जागीच मरण पावले त्यांचे मरणास मोटार सायकल चालक विष्णु जाधव कारणीभूत झाला वगैरे फिर्याद वरुन मा. पोनि साहेब यांचे आदेशाने वर प्रमाणे गुन्हा दाखल करुन पुढील तपास बीट पोहेका / 2078 लक्षटवार यांचे कडे दिला

13. Action taken: Since the above information reveals commission of offence(s) u/s as mentioned at Item No. 2. (केलेली कारवाई: बाब क्र. २ मध्ये नमूद केलेल्या कलमान्वये वरील अहवालावरुन अपराध घडल्याचे.)

(1) Registered the case and took up the investigation:
(प्रकरण नोंदविले आणि तपासाचे काम हाती घेतले):

or (किंवा)

(2) Directed (Name of I.O.) (तपास अधिका-याचे नाव):

NAMDEV KOTTU JADHAV

Rank (पद): HC (Head Constable)

No. (क्र.): POBN78142

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.)

N.C.R.B (एन.सी.आर.बी)

L.I.F.-I (एकीकृत अन्वेषण फॉर्म - १)

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

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 स्वाक्षरी)

Name (नाव): AJIT POPAT KUMBHA

Rank(पद): I (Inspector)

No.(सं.): 12401003905APKM830

CRIME DETAILS FORM

घटनास्थळाचा पंचनामा / गुन्ह्याचा तपशिल नमुना

१. राज्य महाराष्ट्र जिल्हा औंदेड पोलीस स्टेशन भोकर पहिली खबर/कार्यवाही क्र: 4 / २०२३ दिनांक 12/01/2023

२. अधिनियम व कलम: कलम 106, 125(A), 125(B), 281 B.N.S.

३. घटनेचे ठिकाण दाखविण्याचे :-

नांव :- अजुन कैलास जाधव वडीलाचे/पतीचे नांव कैलास जाधव

वय 19 वर्ष, धंदा :- मजुरी जात :- मराठा मोबाईल नं. 797231426

पत्ता :- मालवकी गा. भोकर तालुका भोकर जिल्हा औंदेड राज्य महाराष्ट्र

४. गुन्ह्याचा प्रकार (गुन्ह्याचे सर्व पध्दतीसह) :-

i) प्रधान शिर्ष :- अपहर्ष मृत्यू

ii) प्रधान शिर्षचे वर्गीकरण :- क्रांति

iii) पध्दती :- हथगळ व जिवकावळी पणजे वाहण नालवल्याने मृत्यू

iv) वापरलेली वाहने :- —

v) केलेले वेषांतर/केलेली बतावणी :- —

vi) वापरलेली भाषा/बोली भाषा :- —

vii) विशेष वैशिष्ट्य-१ :- —

विशेष वैशिष्ट्य-२ :- —

विशेष वैशिष्ट्य-३ :- —

viii) घटनेच्या ठिकाणाचा प्रकार :- यात्रेला डारोपीने मोटार सायकल हथगळ व जिवकावळी पणजे नालवून ओडण्या काजुचे खडान पडल्याने पाठेभुशील कैलास जाधव हा मृत्यू पावला आहे

ix) अंतर्भुत मालमत्तेचा प्रकार

३) — ४) —

५. वळीचा तपशिल (आवश्यक असल्यास स्वतंत्र कागद जोडावा):-

अ. क्र.	संपूर्ण नांव	जन्म तारीख/वय	लिंग	राष्ट्रीयत्व	धर्म	जाती/जमाती	व्यवसाय	पत्ता	दुखापत गंभीर/ साधी	साधने/ हत्यार
१	२	३	४	५	६	७	८	९	१०	११
११	केलस काका जाधव	३६	पू.	भारतीय	हिंदू	वेंजारा	मजुरी	माळकी	मध्यम	—

६. गुन्ह्याचा हेतु:-

यातील आरोपी यांनी आपल्या लाब्यालिल मोठे सामकाल भरशावेणत हयुगय, च विव्वाकय, पणे याळवुन थड्यात पडले त्यामुळे त्याचे पाठीमागी वसलेला केलस काका जाधव याचे मरणास कारणी हेतु झाले आहे.

७. चोरीच्या/अतंभुत मोलमत्तेचा तपशिल:-

८. घटनेच्या जागेचे वर्णन :-

माझी विनंती कि, आम्हा पंचायत पोहेका/लुश्यावर पोलीस स्टेशन भोकरा जोगी कोलावुन वांकवले कि, पोलीस स्टेशन भोकरा भुवन १५/२०१५ कलम १०६, १२५(अ), १२५(ब), २४१ एम.ड. मधील पिंपादी आपुन केलस जाधव रा. माळकी हा समक्ष हाजव झालुन तो सांगले त्या सुमारा हाडनाम्यष्ट पंचनामा करणे आहे जामे कळवल्याने आम्हा पंच हाजव आले, आपुन केलस जाधव यांनी येगीतले कि, दि. १२-१-२५ रोजी सकाळी ०६:०० वा सुमारास माझी बडील व चुलत भाऊ विठ्ठल राम जाधव असे मिळुन कामाक्षीत भोकरा येथे जाण्यासाठी झुल्लेले १-०० वाजताचे सुमारास विठ्ठल जाधव यांचे फोन कळुन सांगितले कि, मा. महेर सामकाल याळवतु कामाक्षीत चाकुरेड पोलीस काम जवळ जात वसलेला आपल्या गाडी रांडच्या कोळुस चालु असलेला कामाक्षी थड्यात पडल्याने मला हुक्का मार कागला व काका केलस जाधव हे गेलत नाहीत असे सांगितल्याने मा. व आई वरुकाई जाधव, पोलीस पाहिले T.O.

(3)

८. घटनेच्या जागेचे वर्णन (पुढे चालू) :-

समोसा मानसिंगा डोळे, बागातील नोव्हेंडिक तेथे जावून पाहिले
उभाला वडील केलास जाणवत हे रोडच्या बाजूच्या खडपात
मोटर सायकल एवढी पडलेली होते. त्याचे नाका-गोंडाहून
रक्त निघत होते. वडील केलास जाणवत हे मरण पावले
आहेत. चुलत भाऊ विठ्ठल राम जाणवत यात मोठ्या सायकल
व. मम २६-८५-७१४० हि हयगाय व गिळ्याकडून पण
नाखळ रोडच्या बाजूने खडपात पडून वडीलचे मरण
कारण सुत झाला आहे. कोरे माहिती काढून त्यात
घटनामध्य काढले आहे.

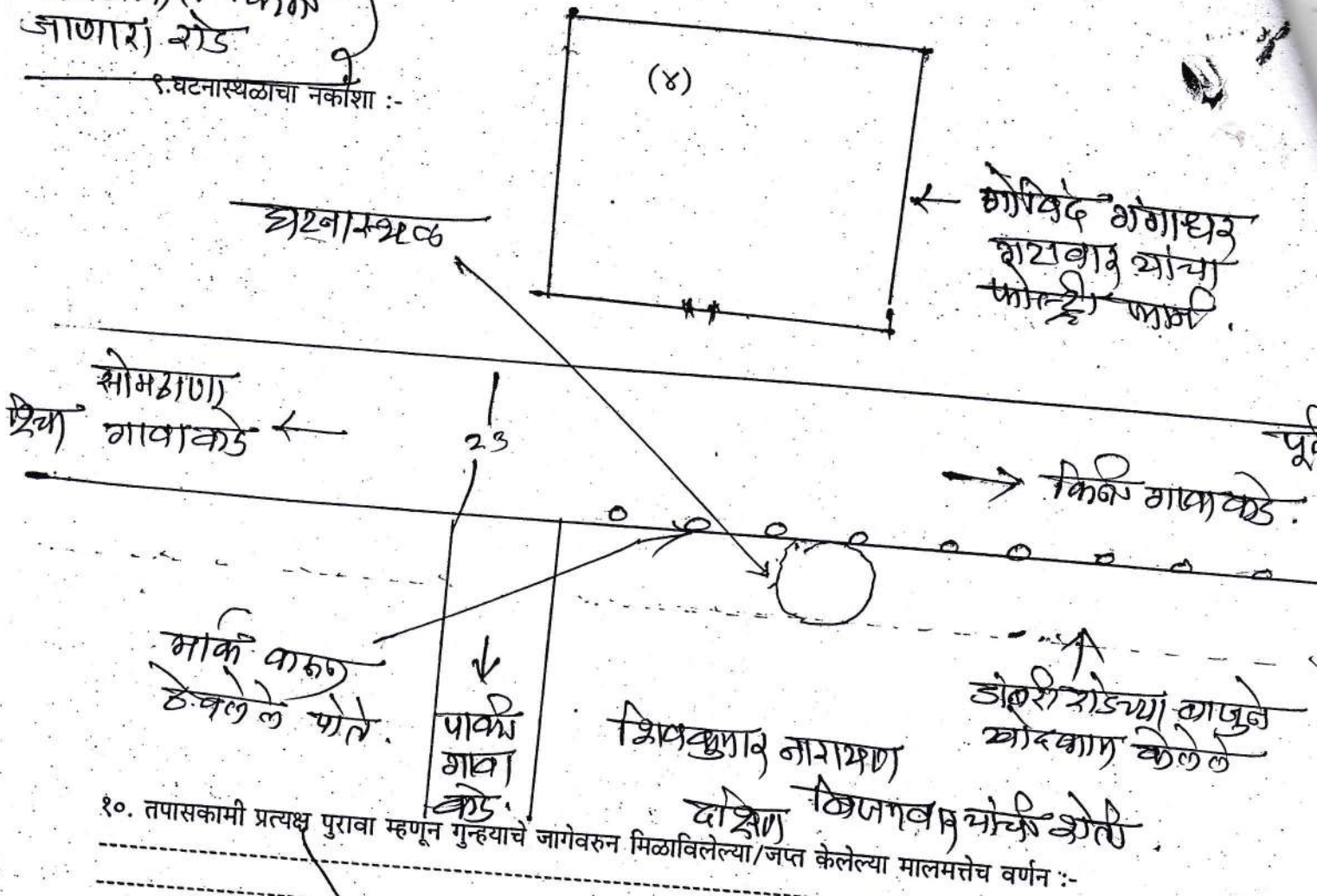
सदरचे घटनामध्य हे सोमनाथ ते किर्लो
जागेचे रोडवरील मुली स्टूड जवळील पोलिस ठाणे जवळील
रोडवर आहे. त्याचे डाव्या व उजव्या वारकाडने पाहता
वेळी आसता सदर ठिकाणी पूर्व ते पश्चिम जाणारा डोंगर
रोड दिसत आसून रोडच्या उजव्या बाजूला खोदकाम केलेले
आसून सहाय्य खुदकेली एक साड्या जागा हि वडील
सात फुट खोलीची आहे. त्या ठिकाणी वगड मुलम
राकलेला दिसत आहे. सदरचे काम हे खुदके - डाव्या
रुंदीचे आहे. सदर रोडच्या बाजूने माक केलेले पांढरे
पात ठेवलेले दिसत आहेत. सदर रोडचे काम चालू
आसल्याने व-याच ठिकाणी काम चालू आहे. याच
मध्याचे तणक हे इक्वेर २२ पंचनामा प्रमाण आहे.
सदरचा रोड हा खोद २३ फुट रुंदीचा आसून
काम चालू आहे. सदर घटनास्थळ वरून गुन्ध्याचे
तपास काम जप्त करणारी मोम कोळी बसु चिप
मिळून आली नाही. सदर घटनास्थळी नुसते सिमा पाहून
१) पूर्व :- खोदकाम केलेला रोड व इक्वा बाजूला डोंगर
रोड आहे. २) पश्चिम :- खोदकाम केलेला रोड व डोंगर
रोड आहे. ३) दक्षिण :- शिपकुमार नारायण विजयवार यांचे
घात आहे. ४) उत्तर :- गोविंद गंगाधर गरावर यांचा पोल्ड
- पात आहे.

जेणे प्रमाणे आम्ही पंचा मदत दिसते स्थिती
प्रमाणे घटनास्थळ पंचनामा केला त्यावर काही मद्य
केल्या तो खरे व खरा आहे.

① Latitude:- 19.273292

② Longitude:- 77.776635

सोमठागाव ते किर्कि
जाणारा रोड
१. घटनास्थळाचा नकाशा :-



१०. तपासकामी प्रत्यक्ष पुरावा म्हणून गुन्ह्याचे जागेवरून मिळविलेल्या/जप्त केलेल्या मालमत्तेचे वर्णन :-

११. घटनास्थळ पंचनाम्याची दिनांक 12/01/2025 वेळ 17:00 ते 17:40 वार सोमवार

१२. पंचाची नावे व संपूर्ण पत्ता आणि सही :-

- १) देवीदास मंगीलाल राठोड वय ३६ वर्ष
व्यावसाय शेती रा. मोर्चिंदे अंगाधर मो. 9552338295
- २) रूपका विश्वनाथ राठोड वय २५ वर्ष
व्यावसाय मजदुरी रा. शेती रा. मोर्चिंदे अंगाधर मो. 7767895561

दिनांक. 12/01/2025

तपासक अंमलदाराची सही :-
नांव :- वि. सु. लक्ष्मण
पदनाम :- पोलीस स्टेशन
पोलीस स्टेशन :- मोर्चिंदे

63

Regn. No. MH26BS7196 MH9059492

Regd. Owner	KARLAS BABA JADHAV	
SNOW of	BABA	
Purpose	NEW / HPA	
Regn. Date	28/01/2020	
Color	Gray Black	
Fuel	PETROL	
Vehicle Class	M-Cycle/Scooter - NT	
Body Type	SOLD WITH PILLION	
Manufacturer	HERO MOTOCORP LTD	
Chassis No.	MBLHAW084KAL12147	
Engine No.	HA10AGKAL21768	
Model No.	SPLENDOR+ (BS-SEI) (DRUM CAST)	
Hypothecated To	SHRIRAM CITY UNION FINANCE LTD	
Manufacturing Dt.	11/2019	
Seat Capacity	002	
Stand Capacity	00	
Tax Paid Up To	LTT	
Regd. Validity	28/01/2035	
Address	MALDHARI TANDA PO KIN TQ BHOKAR Nanded MH 431801	
		Unladen Wt. 000112 Cubic Capacity 000007 Wheel Base 001230 R.L.W. 000242

RTO NANDED
Issuing Authority

Signature Of Issuing Authority

शार. सि. कुक

MH26-B5-7186

मयतः केलाय जाणा जाशिव
रा. शासक्या

MAHARASHTRA STATE GOVERNMENT
CERTIFICATE OF REGISTRATION

Form 23A

TWO WHEELER CERTIFICATE - CUM - POLICY SCHEDULE

Policy No.

Hero
INSURANCE BROKING

Bundled - Two Wheeler Policy (1 Yr OD + 5 Yrs TP)

Cert. No.
3005/47284286/10316/000

Ground, First, Second and Third ICICI Lombard House V
eer Sawarkar Marg Mumbai-Prabhadevi Maharashtra 400
025
Tel:1800 2666
customersupport@icicilombard.com

Hero
INSURANCE BROKING

Insured	Business/Profession	Address of The Insured		TP Valid From	TP Valid To	
Mr KAILAS BABA JADHAV	Business	AT. MALDHARI TANDA PO. KINI TQ BHOKAR DIST NAN DED Nanded MAHARASHTRA 431601		16-01-2020 14:30:58	Midnight of 15-01-2025	
Vehicle Regn No.	Engine No.	Chassis No.	Make & Model	Year of Mfg	Cubic Capacity	GSTIN No. (Customer)
—	HA10AGK4L21768	MBLHAW084K4L12147	Hero MotoCorp SPDDIRSCC(SP+13S IBS)	2019	100	
Declared Value (IDV) of Vehicle	Side Car IDV	Non-Electrical Accessories IDV	Electrical Accessories IDV	CNG/LPG/Bi- Fuel IDV	Total IDV	
53390.00	NA	0.00	0.00	0.00	53390	
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement With	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Premium	
Nanded	Solo	SHRIRAM CITY UNION FINANCE LTD. HPA	—	2	5510.00	

Section A

Own Damage (OD) Total	895.00
Accessories	0.00
Electronic & Electrical Accessories	0.00
Bi-Fuel Kit	0.00
Geographical Extension	160.00
ND Cover	0.00
Handicapped Discount	0.00
For Anti-Theft Discount	0.00
NCB	0.00
Total Section (A)	1055.00

B. Liability Premium Computation (Section II) in Rs.

Basic TP Cover	3285.00
CNG/LPG/Bi-Fuel Kit	0.00
Add	
Compulsary PA Cover (Owner Driver)	330.00
Optional PA Cover(Un Named Passenger)	0.00
Optional PA Cover(Un Named Driver)	0.00
Legal Liability Cover (Paid Drivers, Cleaners)	0.00
Legal Liability Cover (Per Licensed Passenger)	0.00
Total Liability Premium (B)	3615.00
Total Premium (A + B)	4670.00
For any other extra	0.00
CGST @ 9.00%	420.00
SGST @ 9.00%	420.00
Gross Premium	5510.00

1.RegistrationNo.:115||2.CINNo.:U67200MH2000PLC29408||3.GSTIN No.:27AAACI7904G12N || UIN No.- IRDAN115RP0007Y01201819

OD Policy	16-01-2020 To 15-01-2021	16-01-2021 To 15-01-2022	16-01-2022 To 15-01-2023	16-01-2023 To 15-01-2024	16-01-2024 To 15-01-2025
Period	2021	2022	2023	2024	2025
IDV	53390	NIL	NIL	NIL	NIL
CPA	Rs. 15 lakhs.	NIL	NIL	NIL	NIL

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 the provisions of Chapter X & XI of M.V. Act 1988

Broker : Hero Insurance Broking India Pvt. Ltd.



Premium of Rs.	5510.00	Received Vide Cash/Cheque No.	
Dated		Nominee Name	JADHAV MRS
Drawn on		Nominee Age	30
Acknowledgement Dt	16-01- 2020	Nominee Relation	Wife

The policy is subject to a compulsory excess of Rs. 100/- & Depreciation is applicable as per policy terms & conditions*(Please turn overleaf for details)
Consolidated Stamp Duty Paid Endorsements: IMT - 22,5

16-Jan-2020
Date & Signature
of proposer

Registration No: 649 Tel No: 1800-102-4376

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

ZILLA PARISHAD BLDG.NANDED

Dealer's Stamp & Signature

On behalf of ICICI Lombard General Insurance
Company Ltd

[Signature]

Duly Constituted Attorney

Received with Thanks Rs 5510.00 from Mr KAILAS BABA JADHAV as premium against the money receipt no 02180120266307
Regd. & Head Office : ICICI Lombard General Insurance Company Limited, ICICI Bank Tower, Bandra Kuria Complex, Bandra
East, Mumbai-400051 The stamp duty of Re. 0.5 paid in cash or by demand draft or pay order, vide Receipt / Challan No 5813890
dated September 28th, 2017

For further information about motor insurance policy please also visit <http://irda.gov.in> >> Grievances >> Policyholder Handbooks



Hero MotoCorp Ltd.
Authorised Dealer

RIDEWELL MOTORS

Z. P. Building, NANDED-431601. (M.S.)

e: hero@ridewellmotors.com

GSTIN : 27AAEFR3880M1Z0

TAX INVOICE

Place of Supply
Contact Id
Name of the Customer

MAH, 27
10316-01-SCON-0120-10960
KAILAS BABA JADHAV

Address

AT. MALDHARI TANDA PO. KINI
BHOKAR
NANDED,
MAHARASHTRA
27

State Code

9381704832

Mobile #

Home Phone #

Hypothecation with

SHRIRAM CITY UNION FINANCE LTD.

S.No Model

1. SPLENDOR +

HSPDIRSCCR

GBK

87112029 PC

Engine#

HA10AGK4L21768

Chassis #

MBLHAW084K4L12147

CGST %

14

SGST %

14

Amount
43,906.25

Sub Total

Taxable Value

CGST on 43,906.25

SGST on 43,906.25

Ex Showroom Price

Net Amount

43,906.25

43,906.25

6,146.88

6,146.88

56,200.00

56,200.00

56,200.00

Grand Total

Rupees Fifty Six Thousand Two Hundred Only

Vehicle cost is inclusive of toolkit, owner's manual and first aid kit.

Battery #

Reg #

Key #

FSC #

HLD359256

Remarks

R.NO.

HSRP - No extra charge shall be taken for affixing HSRP by any of HMCL Network Partner.

Customer's Signature



All Hero Products comes
with 5 year warranty
without any additional cost.

For RIDEWELL MOTORS

Authorized Signatory

Terms & Conditions

- # Kindly visit HMCL dealership within 15 days of receipt of intimation of Registration Number to get HSRP affixed to the vehicle. In case of not getting HSRP affixed in said time, new plate will have to be re-ordered.
1. E & O.E.
 2. Goods once sold will not be returned or exchanged under any circumstances.
 3. The vehicle/documents has been thoroughly inspected, tested and is free of any kind of defect and is upto my satisfaction.
 4. I have also read the warranty terms and conditions as explained in the owner's manual & understand that my warranty claims if any, will be considered by the manufacturer only in accordance with the scope and limit of warranty as laid down in the warranty certificate.
 5. All disputes are subjected to the jurisdiction of courts of law at NANDED.
 6. I have checked my particulars and are correct to best of my knowledge.
 7. I have received the vehicle in good condition along with tool and first aid kit and other compulsory accessories.
 8. Registration and insurance will be done at the owner's risk and liability.
 9. I have understood all the conditions about Colour, Model and Manufacturing Date.
 10. I give Hero MotoCorp Ltd. (HMCL) and its agents/partners consent to contact me for any marketing or promotional communications through any medium and enable WhatsApp assistance. I understand HMCL privacy policy as mentioned on www.heromotocorp.com.

नोट : गाडीची आर.टी.ओ. पामींग ५ दिवसात / सुट्टीच्या दिवसाला धरून १० कि.मि. च्या आत करावी. अन्यथा दंड भरावा लागेल

THE UNION OF INDIA
INDIAN STATE MOTOR DRIVING LICENCE

DL No 18425 20170017257 DOI 18-11-2017
 Valid Till 17-11-2037 (NT)

18-11-2017
 FORM 7
 RULE 16 (7)

AUTHORISATION TO DRIVE FOLLOWING CLASS
 OF VEHICLES THROUGHOUT INDIA

COV DOI
 CAV 18-11-2017
 ACV 18-11-2017

DOB 03-04-1992 BO

NAME RAHUL KASHYAP
 FATHER NAME JAGDEEP

इससे शा. नाम 3/01/11
विकल्प राम जगदीप
शा. नाम 3/01/11

PROVISIONAL Post-mortem Report-cum-death Certificate (9)

M. NO. 01/5002/2025 Dated: 12/01/2025 Time: 11:35 AM To 12:35 PM

Name of the deceased : Kailas Baba Jadhav

Age: 36 Yr. Sex: male R/O: Maldan Tanda Tq. Bhokar
Dist. Nanded

As per police inquest died on: 12/01/2025

Referred by Investigating officer B.D. Chinchame PC-1602

Brought and identified: Vishnu Ram Jadhav

Of police Station : Bhokar

PROVISIONAL OPINION AS TO CAUSE OF DEATH:

" provisional cause of death is due to -
Head Injury "

NOTE : Viscera Preserved/Not Preserved.

तपासणी अधिकाऱ्यास सुचित करण्यात येते.
की, सदर प्रकरणातील मयताच्या जठर धुण्याचा
(Stomach Wash) नमुना उपचार करणाऱ्या
डॉक्टरांकडून ताब्यात पेऊन C.A. तपासणीसाठी
पाठवावा.

Bh. C. K. Jadhav

Medical Officer

(BH. C. K. Jadhav, Bhokar)

RURAL HOSPITAL BHOKAR,

शवविच्छेदना नंतर प्रेत, तात्पुरता शवविच्छेदन अहवाल व पंचनाम्यात नमूद कपडे व चीज वस्तू ताब्यात मिळाले.

ताब्यात घेणाऱ्याचे नांव : वि. एस. ल. शर्मा

सही

हुद्दा 12/01/2025

पोलीस स्टेशन : भोकर

Memorandum of a post-mortem examination held at Phe Kini Tq. Bhokar Dispensary
Kailas Baba Village Dnt. Nanded Hospital
on the dead body of Jadhav of maldar Tandla
Age-36 yrs/male City

Taluka Bhokar, District Nanded, by Dr. Waghacker S.K.
(medical officer Phe Kini)

I. General Particulars—

1. (a) By whom was the corpse sent? — B.D. chinchame PC-1602
Police station Bhokar
- (b) Name of place from which sent. — Somthana Kini Road at near pati village
bus stand.
- (c) Distance of place from which sent. — Approx. 4 Km.
2. By whom was the corpse brought? — B.D. chinchame B.No. - 1602 PS Bhokar
3. By whom identified? — Nishnu Ram Jadhav 32 yrs/male
R/o - maldar Tandla
4. The date, hour and minute of its receipt. — on 12/01/2015 at 11.20 Am
(a) The date, hour and minute of beginning post-mortem examination. — on 12/01/2015 at 11.35 Am
(b) The date, hour and minute of ending post-mortem examination. — on 12/01/2015 at 12.35 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 & requisition
to know the cause of death.

6. If not examined at Dispensary or Hospital—

Plg

(a) Name of place where examined.

Forwarded to

(b) Distance from Dispensary or Hospital—

or information with

2. Viscera h: Analyse is necess

(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, 36 yrs, Hindu.

Copy forward

Description of clothes and of ornaments on the body.

① Grey white coloured shirt

② white Baniyan

③ Black coloured pant

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

All clothes are handed over to PC on duty.

Seen and e.

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

- mole over neck

- Tattoo of "Om" over (R) arm

- Tattoo of name "Ramesh" over (L) hand.

- All teeth present

Remarks o

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.

- Average built.
Body—cold.

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

- Rigor mortis partially developed in head &
neck muscle & in upper & lower limbs.

12. 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.
- Post mortem lividity present on back &
buttock region except at present & it is
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.

- Eyes—closed
- Mouth—Semi-opened
- Blood oozes from nose & mouth
- Tongue present inside the mouth

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

- Dry blood clot present over face
places.

15. Injuries to external genitals.
Indication of purging.

- no injury to external genitals
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 limbs - straight

- (Rt) hand flexed at elbow joint & extended
at wrist joint.

- (Lt) hand slight flexed at elbow & extended
at wrist joint.

17. Surface wounds and
injuries—Their nature, posi-
tion, dimensions (measured)
and directions to be
accurately stated their
probable age and causes
to be noted.

① Bone deep laceration on frontal reg-
ion of size $4 \times 1 \times 0.2$ cm. Dark red in
colour.

② Fracture of right temporal bone of
size 5×0.4 cm

③ Bruises present over (Rt) eyeball

④ multiple Abrasions present on lower
abdomen, & limbs.

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.

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.

— Scalp haematoma seen.

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

① Fracture of vault of skull of right middle fossa region of size 0.4×0.5 cm. margin infiltrated with blood.

- (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:— 1. subdural haematoma present on occipital & frontal region of size 0.6×0.4 cm: Dark red in colour.

— Brain:— Intact, congested.

20. Thorax—

- (a) Walls, ribs, cartilages

— Intact, pale

- (b) Pleura

— Intact, pale

- (c) Larynx, Trachea and Bronchi.

— Intact, no foreign body, mucus pale

- (d) Right Lung

} Intact, on cut section blood tinged fluid oozes out.

- (e) Left Lung

— Intact, pale.

- (f) Pericardium

— Intact, pale

- (g) Heart with weight

— Intact.

- (h) Large vessels

— Nil.

Additional remarks.

21. Abdomen—

- Walls - Intact.
- Peritonéum - Intact, pale, no e/o of any injury.
- Cavity - No free fluid in peritoneal cavity.
- Buccal Cavity: teeth, tongue and Pharynx. - Intact, no foreign body, mucosa pale.
- Desophagus - Intact, mucosa pale.
- Stomach and its contents - Intact, 200ml yellow ed fluid, peculiar smell p.
- Small intestine and its contents. } Intact, partly loaded material, mucosa pale.
- Large intestine and its contents. }
- Liver (with weight) and gall bladder. - Intact, pale.
- Pancreas and Suprarenals - Intact, pale.
- Spleen with weight - Intact, pale.
- Kidneys with weight - Intact, pale.
- Bladder - Intact, mucosa pale.
- Organs of generations - ~~Intact~~ Intact, pale.

midigest
mucosa pa
& pump

18

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.

- No viscera preserved.

7
Spine and Spinal Cord—

Intact, not opened.

Opinion as to the cause
probable cause of death.

→ cause of death is due to "Head Injury"

Bulagadkar
Medical Officer
P.H.C.Kini Tq.Bhokar

Dated - 12/01/2025

*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*.

No.

pm no - 01/5kw/200

Place Dispensary
Civil Hospital

pre kini. dated 20/10/200

Forwarded to the Police Sub-Inspector police station Bhokar.
for information with reference to his No. CR NO 14/25 of dated 12/10/200

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 presented.*

Bulagaachar
Medical Officer
P.H.C. Kini Tq. Bhokar
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,

200

on

Remarks of the Civil Surgeon,

(if any)

Civil Surgeon