

FORM-I**FIRST ACCIDENT REPORT (FAR)**

By Investigating Officer to Claims Tribunal
Within 48 hours of the receipt of intimation of the Accident
Copy to Victim(s), Insurance Company and State Legal Services Authority (SLSA)

FIR No.		Lava Ps Case No-34/2023
Date		07.10.2023
Under Section		279/337/338 OF IPC
Police Station		Lava PS
01	Date of Accident	07.10.2023
2.	Time of Accident	10 :15 hrs
3.	Place of Accident	NH 717 A Road In Between 9 th Mile and Lava View Point
4.	Source of Information	Driver/Owner Victim Witness Hospital Good Samaritan Police Others (Specify)
Name, mobile number & address of the Informant		
	Name	Mani Tamang
	Mobile No.	9932768828
	Address	Lava Bazar, PS-Lava Dist Kalimpong
5.	Nature of Accident	Injury Fatal Damage/loss of property Any other loss/injury
	No. of vehicle involved	01
	Whether Registration Number of the Offending Vehicle known	Yes
	Whether offending Vehicle impounded by the police	Yes
	Whether the driver of the offending vehicle found on the spot	Yes
	Number of Fatalities	NIL
	Number of Injured	(08) They got simple scratches and no need to Hospitalization
6.	Details of the Hospital where victim(s) taken	
	Hospital Name	N/A
	Address	N/A
	Doctor's Name	Not known

7	Availability of CCTV Footage If yes, CCTV Footage be preserved and be filed with DAR	Yes	No
8	Details of Owner(s), Driver(s) and Insurance of the Vehicle(s)		
	Details	Vehicle 1 (Offending vehicle)	Vehicle 2
	Vehicle Details		
	Vehicle Registration No.	SK-01-J-2365	.....
	Driver Details		
	Name of the Driver	Beeetu Prasad S/O Swaminath Prasad	
	Address of Driver	Rangpo Bazar East Sikkim	
	Mobile No. of Driver	9679693637	
	Owner Details		
	Name of the Owner	Suresh Bhagat S/O Shedu Bhagat	
	Address of Owner	Rangpo Bazar east sikkim	
	Mobile No. of Owner	N/A	
	Insurance Details		
	Insurance Policy No.	N/A	
	Period of Insurance Policy	N/A	
	Name of Insurance Company	N/A	
	Address of Insurance Company	N/A	
9	Details of Victim(s)		
	Name	Deceased /Injured	Address & Contact Details
i		Sankar Misra (45 yrs.) S/O Shreekant Misra	IBN, Rangpo PS-Rangpo Bazar East Sikkim
ii		Kajal Mishra (35 yrs.) W/O Sankar Mishra	IBN, Rangpo PS-Rangpo Bazar East Sikkim
iii		Bibash Bedant (12 yrs.) S/O Sankar Mishra	IBN, Rangpo PS-Rangpo East Sikkim
iv		Pranika Mishra (06 yrs.) D/O Sankar Mishra	IBN, Rangpo PS-Rangpo Bazar East Sikkim
v		Rakesh Kumar (30 yrs.) S/O Lt. Narayan Tewari	IBN, Rangpo PS-Rangpo Bazar East Sikkim
vi		Ranjit Singha (36 Yrs.) S/O Surender Singha	IBN, Rangpo PS-Rangpo Bazar East Sikkim
vii		Gunjan Singha (32 Yrs.) W/O Ranjit Singha	IBN, Rangpo PS-Rangpo Bazar East Sikkim
viii		Reyansh Singha (05yrs.) S/O Ranjit Singha	IBN, Rangpo PS-Rangpo Bazar East Sikkim
10	Other Accident Details		
i.	Reporting Date & Time	ON 07.10.23 AT 14 :15 Hrs.	
ii.	Landmark	NH 717 A Road In Between 9 th Mile and Lava View Point	
iii.	Severity	Fatal Grievous Injury Simple Injury Hospitalized Simple Injury Non Hospitalized No Injury	

iv.	Count of	Injured	Death
	Drivers	NIL	
	Passengers	08	
	Pedestrians	NIL	
	Animal	NIL	
v.	Collision Type	Vehicle to Vehicle Vehicle to Pedestrian Vehicle to Bicycle Vehicle to Tricycle Vehicle to Animal Driven Cart Vehicle to Animal Skidding others	
vi.	Collision Nature	Head on Collision Hit Parked VehicleHit tree Hit Fixed/Stationary Object Hit from Back Hit from Side Run off Road Overturn Skidding /OverturnSideswipe Vehicle Fell in Gorge/Ditch/WellVehicle Fell in River	
vii.	Initial Observation of accidentscene	Non Provision of Parapets/Crash Barrier on Outer CurveLong Distance Covered/Driver Restless	
		Fell Down From VehicleIllegal Parking on Road Blind Bend / Curve Alcohol abuse Carrying people in loaded vehicleChanging lane without care Dangerous Overtaking Distraction to Driver Driving against flow of traffic Drugs Abuse High Speed Inattentive Turn Accident Due to road Condition Accident Due to Weather Condition Accident due to Heavy Traffic Non-respect of rights of way rules Red Light jumping Overloaded Accident due to Vehicle Defect Over speed while crossing Zebra crossing Over speed while crossing speed breaker	
viii.	Weather Condition	Sunny / ClearCloudy Light Rain/ Heavy Rain Flooding of Causeway / RivuletsHail/ Sleet Snow Smoke/ Dust Strong WindColdHot	

ix.	Light Condition	Day Twilight Darkness with street lights on Darkness with poor street light Darkness-No street light
x.	Accident Spot	Residential Zone Market Zone Institutional Zone Open Commercial Zone School Zone College Zone Other Educational Institutional Zone (Specify)Govt. Institutional Zone Hospital Zone Industrial Zone Harbour Zone
xi.	Visibility	Less than 25 Meters 25 Meters 50 Meters 75 Meters 100 Meters and Above
xii.	Load Condition (1)	Excess Passengers Normally Loaded Empty Not Known
xiii.	Load Condition (2)	Excess Goods Goods Overheight Goods Rear Overhanging Goods Side OverhangingNormally Loaded Empty Not Known
xiv.	Road Classification	Expressway National Highway State Highway Major District Road Other District Road Village Road Arterial Road Sub Arterial Road Collector Road Local Road
xv.	Local Body	Corporation Municipality / Panchayat

XVI. . P.I.S./EMPLOYEE No. : _____

S.H.O./I.O

Phone No. : 8159030436
LAVA PS, KALIMPONG
Date:

Documents to be attached:

- i. Copy of FIR**

Images/ Videos to be attached:

- i. Main Resting Place of Vehicle**
- ii. Damage to Vehicle**
- iii. Damage to Property**
- iv. Obstructions of Objects on Road**
- v. Junction/ Road Type**
- vi. Road Surface**
- vii. Skid Marks**
- viii. Surroundings**
- ix. Any feature which might have contributed to the accident**
- x. Other Images**
- xi. Other Vide**

FORM 54
[See Rule 159 (a) and (2)
Accident Information Report

1) Name of the Police Station: Lava Police Station.

2) CR No./ Traffic Accident Report: Lava PS Case no: 34 /23, Dt: 07.10.2023, U/S 279/337/338 of IPC.

3) Date, time and place of accident: On 07.10.2023 at about 10:15 hrs NH 717 A Road In Between 9th Mile and Lava View Point Lava Police Station, Kalimpong.

4) Name and full address of the injured / deceased: (i) Sankar Mishra (45 yrs.) S/O Shreekant Mishra (ii) Kajal Mishra (35 yrs.) W/O Sankar Mishra (iii) Bibash Bedant (12 yrs.) S/O Sankar Mishra (iv) Pranika Mishra (06 yrs.) D/O Sankar Mishra (v) Rakesh Kumar (30 yrs.) S/O Lt. Narayan Tewari (vi) Ranjit Singha (36 Yrs.) S/O Surender Singha (vii) Gunjan Singha (32 Yrs.) W/O Ranjit Singha and (viii) Reyansh Singha (05yrs.) S/O Ranjit Singha all are IBN Rangpo Bazar PS-Rangpo East Sikkim.

5) Name of the Hospital he/she was moved: Rangpo PHC East Sikkim.

6) Registration Number of vehicle and the type of the vehicle: SK-01-J-2365 (Offending Vehicle) .

7) Driving Licence particulars: Driver of the offending vehicle Beetu Prasad S/O Swaminath Prasad of Rangpo Bazar PS-Rangpo East Sikkim.

8) Driving Licence number and date of expiry: SK0120180002446 valid upto 18.12.2038.

9) Address of the issuing authority: RTO Gangtok East Sikkim.

(a) Badge No in case of public service vehicle: N/A

10) Name and address of the owner of the vehicle at the time of the accident: Suresh Bhagat S/O Lt. S. Bhagat Rangpo Bazar PS-Rangpo East Sikkim.

11) Name and address of the Insurance Company with whom the vehicle was insured and the particulars of the Divisional Officer of the said insurance company: N/A

12) Number of the Insurance Policy/ Insurance Certificate and the date of validity of the Insurance Policy/Insurance Certificate: N/A

13) Registration particulars of the vehicle (class of vehicle): SK-01-J-2365 (Bolero)

(a) Registration no: SK-01-J-2365.

(b) Engine no: GHC4K76608.

(c) Chassis no: MAA1WG2GHKC2K91011

14) Route Permit particulars:

15) Action Taken, if any, and the result thereof: Lava PS Case no: 31 /23, Dt: 03.10.2023, U/S 279/337/338 of IPC

FIRST INFORMATION REPORT

(Under Section 154 Cr. P.C.)

935

Dist. Kalimpong P.S. Lava Year 2023 FIR No. 34/23 Date 07/10/2023i) Act IPC Sections 277/377/378 IPC ii) Act _____ Sections _____

(iii) Act _____ Sections _____ (iv) Others Acts & Sections _____

(a) Occurrence of Offence : Day Saturday Date From _____ Date To 07/10/2023
Time Period _____ Time From _____ Time To 10:15 hrs.(b) Information received at P.S. Date 07/10/2023 Time 17:15 hrs.(c) General Diary Reference : Entry No(s) 1830 Time 14:15 hrs.

Type of Information :

Written / Oral

Place of Occurrence : (a) Direction and Distance from P.S. Approx. 15 Km East Beat No. J.L. No. 15(d) Address In Between 9th Mile Fatok and Lava view point
PS-Lava, Dist: Kalimpong

(e) In case outside limit of this Police Station, then the

Name of the P.S. _____ District _____

Complainant / Informant :

(a) Name Mami Tamang(b) Father's / Husband's Name B.B. Tamang(c) Date / Year of Birth : _____ (d) Nationality Indian

(e) Passport No. _____ Date of Issue : _____ Place of Issue _____

(f) Occupation _____

(g) Address Lava Bazar, PS-Lava, Dist: Kalimpong.

Details of known / suspected / unknown accused with full particulars

(Attach separate sheet, if necessary) :

Beeetu Prasad (28 yrs)
s/o Bhanu Prasad
of Rangpo East Sikkim

Reasons for delay in reporting by the Complainant / Information

Particulars of properties stolen / involved (Attach separate sheet, if necessary) : One Bolor bearing Regd.
no. SK-21-2365

Total value of properties stolen / involved _____

Inquest Report / U.D. Case No., if any _____

FIR Contents (Attach separate sheets, if required) : The original written complaint which is
treated as FIR is enclosed herewith reproduced overleaf.Action taken : Since the above report reveals commission of offence(s) as mentioned at item No. 2., registered the case and took up the
investigation / directed ASST. P. Officer Chandan Kumar of Lava PS. to take up

investigation / refused investigation / transferred to P.S. _____ on point of

jurisdiction. FIR read over to the Complainant / Informant, admitted to be correctly _____ recorded and a copy given to the Complainant /

Informant free of cost.

Officer - In - Charge

Lava Police Station

Signature of Officer - In - Charge, Police Station

14. Signature / Thumb impression
of the Complainant / InformantName : Sub Inspector of PoliceRank : No. Sub Inspector of Police

15. Date & Time of despatch to the court :

21. 07/10/2023

To,
The officer Incharge
Lava P.S.
under Lava P.S (Algaah)
Kalinpong

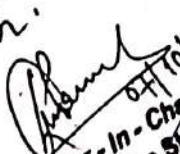
Sub : FIR

Sir,

I Mari Tamang s/o Lt. B.B Tamang of Lava Bazar dist
Kalinpong P.O and P.S Lava, today on 7/10/23 at around 10:15 hrs
I visit Lava view point. At once, I saw the vehicle was accident
near about Lava view point- and in the middle of Lava 9th mile.
There was 7-8 passenger bearing vehicle no-SK01J2365 driver
Bittu Prasad s/o Lt. Sribath Prasad and the passenger was light
injured. They had a first-aid first, then the passenger has
been transfer to Siliguri from another vehicle for their destination.

Therefore, I would like to request you kindly take necessary
action laudably.

Received of Lava P.S
vide Lava P.S A.D.C. No.
186 dt: 07/10/23 and
started Lava P.S case
No. 24/23 dt: 07/10/23 u/s
279/23 of IPC and
emailed to Ass. Protix ch.
In-charge of Lava P.S for its
investigation.


Officer-In-Charge
Lava Police Station
District Kalinpong

Thank you
Your sincerely
Mari Tamang.
9932768228,

FORM-III**DRIVER' FORM**

By Driver of the vehicle(s) to Investigating Officer Within thirty (30) days of the Accident
Copy to Victim(s) and Insurance Company

FIR No.	34/23
Date	07.10.2023
Under Section	279/337/338 of IPC
Police Station	LAVA PS

1.	Driver Details	
	Name	BEETU PRASAD
	Father's Name	SWAMINATH PRASAD
	Mobile No.	09679693637
	Address	RANGPO BAZAR PS-RANGPO EAST SIKKIM
2.	Age/Date of Birth	
3.	Gender	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
4.	Educational Qualifications	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Senior Secondary Certificate <input type="checkbox"/> Higher Secondary Certificate <input type="checkbox"/> Graduate <input type="checkbox"/> Postgraduate <input type="checkbox"/> Doctorate <input type="checkbox"/> Uneducated
5.	Occupation	<input type="checkbox"/> Private Service <input type="checkbox"/> Government Job <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <input type="checkbox"/> Self-Employed <input checked="" type="checkbox"/> Others
6.	Monthly Income	Rs.
7.	Driving Licence	<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Learner's <input type="checkbox"/> Juvenile <input type="checkbox"/> Without License <input type="checkbox"/> Others (Specify)
8.	Driving Licence No.	SK0120180002446
9.	Period of Validity of Licence	valid upto 18.12.2038
10.	Licensing Authority	RTO Gangtok East Sikkim.

11.	Vehicle Registration No.	SK-01-J-2365
12.	Vehicle Type	
13.	Owner Details	
	Name	Suresh Bhagat S/O Lt. S. Bhagat
	Mobile No.	
	Address	Rangpo Bazar PS-Rangpo East Sikkim.
14.	Insurance Details	
	Policy No.	N/A
	Period of Policy	N/A
	Name of Insurance Company	N/A
15.	Other details	
i.	Nationality of Driver	<div>Indian</div> <div>Foreigner</div>
ii.	Occupation of Driver	<div>Advocate</div> <div>Business</div> <div>Clerk</div> <div>Doctor</div> <div>Driver</div> <div>Engineer</div> <div>Farmer</div> <div>House Keeper</div> <div>Labourer</div> <div>Police Officer</div> <div>Politician</div> <div>Retired Officer</div> <div>Student</div> <div>Unemployed</div> <div>Vendor/ Small Business Owner</div> <div>Worker</div> <div>Other</div>
iii.	Injury Type	<div>Back Injury</div> <div>Buttocks Injury</div> <div>Chest Injury</div> <div>Face</div> <div>Hand</div> <div>Head</div> <div>Hip</div> <div>Knee</div>

		Leg Neck Not Applicable Shoulders Injury Abdominal
iv.	Cell Phone Driving?	Yes No Not Known
v.	Severity	Fatal Grievous Injury Simple Injury Hospitalized Simple Injury Non Hospitalized No Injury
vi.	Seatbelt/ Helmet	Yes No Not Known
vii.	Drunk Driving	Yes No Not Known
viii.	Mode of Transport	108 Ambulance Not Hospitalized By Self Private Ambulance Private Vehicle
ix.	Hospitalization delay	<30 Minutes >30 Minutes <1 Hour >1 Hour > 2 Hours > 2 Hours Not Hospitalized
x.	Driving License Type	Known Unknown Without License LLR Not Applicable Juvenile

Verification:

Verified at _____ on this _____ day of _____ that the contents of the above Form are true to my knowledge and the documents attached are true copies of their originals.

Documents to be attached:

- i. ID/address proof
- ii. Driving Licence
- iii. Insurance Policy

FORM-IV**OWNER'S/ INSURED'S FORM**

By Owner of the vehicle(s) to Investigating Officer Within thirty (30) days of Accident
Copy to the Victim(s) and Insurance Company

FIR No.	34 /23,,
Date	07.10.2023
Under Section	U/S 279/337/338 of IPC
Police Station	Lava PS

1.	Vehicle Details	
	Registration No.	SK-01-J-2365
	Colour	WHITE & YELLOW
	Make	MAHENDRA
	Model	BOLERO
	Year of Manufacture	2012
	Chassis No.	MAA1WG2GHKC2K91011
	Engine No.	GHC4K76608.
	Registering Authority Name	RTO GANGTOK SIKKIM
	Vehicle Type	Motorised 2-wheeler Auto Car/Jeep/Taxi Cycle Rickshaw Bicycle Hand Drawn Cart Tempo/Tractor Bus Truck/Lorry Animal Drawn Cart Heavy Articulated Vehicle/ Trolley Not Known Other (Specify)
Vehicle Use Type	Private Vehicle Commercial Vehicle Goods & Carriage Garbage Truck Taxi/Hired Vehicle	

		Public Service Vehicle Educational Institute Bus Others (Specify)
2.	Owner Details	
	Name In case of a company, give name of person in-charge in terms of section 199 of the Motor Vehicles Act, 1988	SURESH BHAGAT
	Father's Name	LT. S. BHAGAT
	Mobile No.	
	Address	RANGPO BAZAR PS-RANGPO EAST SIKKIM.
	Occupation	
3.	DRIVER DETAILS	
	Name	BEETU PRASAD
	Father's Name	SWAMINATH PRASAD
	Mobile No.	9679693637
	Address	RANGPO BAZAR PS-RANGPO EAST SIKKIM.
	Driving Licence No.	SK0120180002446
	Period of Validity	18.12.2038
	Licensing Authority	RTO Gangtok East Sikkim.
4.	Insurance Details	
	Policy No.	N/A
	Period of Policy	N/A
	Name of Insurance Company	N/A
	Address of Insurance Company	N/A
	Details of previous Insurance Policy	
	Whether the vehicle previously involved in any MACT case? If yes, give details of FIR and MACT case.	NO
5.	In case of commercial vehicle	
	Permit details	SIKKIM PERMIT VALID UPTO 10.05.2025
	Fitness details	FITNESS UPTO 08.11.2023
6.	Whether the owner reported the accident to the Insurance Company	Yes No
7.	Other details	
i.	Load Category	Passengers Goods
ii.	Age of vehicle	11 YEARS

iii.	Vehicle Description	Transport Vehicle Non-transport Vehicle
iv.	Pollution under Control Certificate Validity	09.03.2024
v.	Tax Details	VALID UPTO22.11.2023
vi.	Seat Capacity	10
vii.	Insurance Company	N/A

Verification:

Verified at _____ on this _____ day of _____ that the contents of the above Form are true to my knowledge and the documents attached are true copies of their originals.

Documents to be attached:

- i. ID/address proof
- ii. Registration Certificate
- iii. Driving Licence of the Driver
- iv. Insurance Policy
- v. Permit
- vi. Fitness

FORM-V**INTERIM ACCIDENT REPORT (IAR)**

By Passenger(s) and Pedestrian(s) to Investigating Officer to Claims
Tribunal Within fifty (50) days of Accident
Copy to Victim(s) and Insurance Company and SLSA

FIR No.	34/23
Date	07.10.23
Under Section	279/337/338 IPC
Police Station	LAVA

1.	Date of Accident	07.10.2023
2.	Time of Accident	10:15 hrs.
3.	Place of Accident	INBETWEEN 9TH MILE FATAK AND LAVA VIEW POINT
4.	Offending Vehicle	
	Registration No.	SK 01- J 2365
	Vehicle Make	BOLERO
	Vehicle Model	2012
5.	Driver of the offending vehicle	
	Name	BEEETU PRASAD
	Father's Name	SWAMINATH PRASAD
	Mobile No.	967963637
	Address	RANGPO BAZAR PS- RANGPO EAST SIKKIM
	Driving Licence	Permanent Learner's Juvenile Without License Others (Specify)
	Driving Licence No.	SK0120180002446
	Validity of Licence	VALID UPTO 18.12.2038
	Licensing Authority	RTO GANGTOK EAST SIKKIM.
6.	OWNER OF THE OFFENDING VEHICLE	
	Name	SURESH BHAGAT
	Father's Name	LT. S. BHAGAT
	Mobile No.	N/A
	Address	RANGPO BAZAR PS-RANGPO EAST SIKKIM.
7.	In case of commercial vehicle	
	Permit details	SIKKIM PERMIT
	Fitness details	N/A
8.	Insurance Details	

	Policy No.	N/A
	Period of Policy	N/A
	Name of Insurance Company	N/A
	Address of the Insurance Company	N/A
9.	Witness(es) to the accident	
	Witness-1: Name	SANKAR MISHRA (45 YRS.) S/O SHREEKANT MISH -RA
	Mobile No.	
	Address	IBN RANGPO BAZAR PS-RANGPO EAST SIKKIM.
	Witness-2: Name	KAJAL MISHRA (35 YRS.) W/O SANKAR MISHRA
	Mobile No.	
	Address	IBN RANGPO BAZAR PS-RANGPO EAST SIKKIM
	Witness-3: Name	
	Mobile No.	
	Address	
	Witness-4: Name	
	Mobile No.	
	Address	
10.	Brief description of the Accident GIST OF FIR : Today on 07.10.2023 received a written complaint from one Mani Tamang S/O B.B. Tamang of Lava Bazar PS:Lava to the effect that on 07.10.23 at around 10:15 hrs he was traveling Lava view Point and he saw one vehicle bearing Regd. no. SK - 01-J 2365 (Bolero) met an accident in between Lava view Point and 9th mile fatak which was coming from Rangpo towards Siliguri. There was 7-8 passengers in the vehicle. Driver of the vehicle named Beetu Prasad S/O Swaminath Prasad of Rangpo East Sikkim and Some passengers got small injuries and doing their first aid Then after the said vehicle's passengers were shifted to another vehicle to reach their destination. Over the written Complaint started Lava PS Case no: 34/23, Dated: 07.10.2023, U/S 279/337/338 of IPC and endorsed to ASI Phatik Ch.Barman of Lava PS for its investigation	
11.	Details of compliance(s)	
i.	Date of filing of First Accident Report (FAR)	
ii.	Date of uploading FAR on the website of Delhi Police	
iii.	Date of delivery of FIR and FAR to the Insurance Company	
iv.	Date of delivery of FIR, Form-II and FAR to the Victim(s)	
v.	Date of receipt of Form-III from the Driver	
vi.	Date of receipt of Form-IV from the Owner	
vii.	Date of delivery of Form-III and Form-IV to the Insurance Company	
viii.	Date of delivery of Form-III and Form-IV to the Victim(s)	
ix.	Whether the information/ documents of the driver/owner have been verified. <i>If yes, attach the Verification Report.</i>	Yes No
12.	Passenger details	
i.	Gender	Male Female TG

ii.	Occupation	Advocate Business Clerk Doctor Driver Engineer Farmer House Keeper Labourer Police Officer Politician Retired Officer Student Unemployed Vendor/ Small Business Owner Worker Other
iii.	Severity	Fatal Grievous Injury Simple Injury Hospitalized Simple Injury Non Hospitalized No Injury
iv.	Injury Type	Back Injury Buttocks Injury Chest Injury Face Hand Head Hip Knee Leg Neck Not Applicable Shoulders Injury Abdominal
v.	Mode of Hospitalization	108 Ambulance Not Hospitalized By Self Private Ambulance Private Vehicle

vi.	Hospitalization Delay	<30 Minutes >30 Minutes <1 Hour >1 Hour > 2 Hours > 2 Hours Not Hospitalized
vii.	Education	Up to Standard 8 Standard 8 to 10 Plus 2 Diploma Graduate Post Graduate and above Uneducated
viii.	Passenger Position	Back Truck or Pick up Bus Passenger Front Seat Other Pillion Rider
		Rear Seat
ix.	Seatbelt/ Hemet	Yes No Not Known
x.	Passenger Action	Standing Sitting Boarding Falling Alighting
xi.	Nationality	Indian Foreigner
13.	Pedestrian Details	
i.	Gender	Male Female TG
ii.	Severity	Fatal Grievous Injury Simple Injury Hospitalized Simple Injury Non Hospitalized No Injury
iii.	Mode of Hospitalization	108 Ambulance Not Hospitalized By Self Private Ambulance Private Vehicle

iv.	Hospitalization Delay	<30 Minutes >30 Minutes <1 Hour >1 Hour > 2 Hours > 2 Hours Not Hospitalized
v.	Education	Up to Standard 8 Standard 8 to 10 Plus 2 Diploma Graduate Post Graduate and above Uneducated
vi.	Injury Type	Back Injury Buttocks Injury Chest Injury Face Hand
		Head Hip Knee Leg Neck Not Applicable Shoulders Injury Abdominal
vii.	Pedestrian Position	At the Pedestrian Crossing Within 50 meters of Pedestrian Crossing At the Traffic Island At the Footpath At the Shoulder of the Road At the Right Hand Side of the Road At the Centre of Road

viii.	Occupation	Advocate Business Clerk Doctor Driver Engineer Farmer House Keeper Labourer Police Officer Politician Retired Officer Student Unemployed Vendor/ Small Business Owner Worker Other
ix.	Nationality	Indian Foreigner

S.H.O./I.O P.I.S./EMPLOYEE No. :

Phone No. 8159030436

Lava PS

Date : _08.12.2023

Documents to be attached:

- i. First Accident Report (FAR)
- ii. Driver’s Form-II along with documents submitted by the Driver
- iii. Owner’s Form-III along with documents submitted by the Owner
- iv. Verification Report.

FORM-VI**VICTIM'S/ CLAIMANT'S FORM**

By Victim(s)/ claimant(s) and Medical Officer(s) to Investigating Officer within sixty (60) days of Accident
Copy to Insurance Company and SLSA

FIR No.	34/23	
Date	07.10.23	
Under Section	279/337/338 IPC	
Police Station	LAVA	

1.	Date of Accident	07.10.23
2.	Time of Accident	10:15 hrs.
3.	Place of Accident	INBETWEEN 9TH MILE FATAK AND LAVA VIEW POINT
4.	Nature of case	Simple Injury Grievous Injury Fatal Damage/loss of the property Any other loss/injury
5.	Registration Number of the offending vehicle	SK 01- J 2365
6.	Owner Details	
	Name	
	Address	
7.	Driver Details	
	Name	BEEETU PRASAD
	Address	RANGPO BAZAR PS- RANGPO EAST SIKKIM
8.	Insurance Details	
	Policy No.	N/A
	Period of Policy	N/A
	Name of Insurance Company	N/A
<u>DEATH CASE</u>		
9.	Name of the deceased	NIL
10.	Father's Name	NIL
11.	Age / Date of Birth	NIL
12.	Date of death	NIL
13.	Gender of the deceased	NIL
14.	Marital status of the deceased	NIL
15.	Occupation of the deceased	NIL
16.	If the deceased was employed, give the name and address of the employer	NIL
17.	Income of the deceased	NIL

18.	Whether the deceased was assessed to Income Tax <i>If yes, file the copy of Income Tax Returns for the last three years</i>		Yes No		
19.	Whether the deceased was the sole earning member of the family		Yes No		
20.	Details of medical treatment given to the deceased, prior to death. Give details of medical expenses incurred		NIL		
21.	Whether the victim got reimbursement of medical expenses from his employer or under a Medilaim policy or under any government cashless treatment scheme or government insurance scheme <i>If yes, provide details</i>		NIL		
22.	Name, Age, Gender, Relation and Marital Status of Legal Representatives of the deceased				
	Name	Age / Date of Birth	Gender	Relation	Marital Status
i.	NIL				
ii.	NIL				
iii.	NIL				
iv.	NIL				
v.	NIL				
vi.	NIL				
23.	Name, Contact Number and Address of Legal Representatives of the deceased				
	Name	Contact Number	Present Address as well as Permanent Address		
i.	NIL				
ii.	NIL				
iii.	NIL				
iv.	NIL				
v.	NIL				
vi.	NIL				
24.	In case of children below the age of 18 years				
	Name of Child	Details of school and class of the child	Annual School fee	Approximate expenditure of the child	
i.	NIL				
ii.	NIL				
iii.	NIL				
iv.	NIL				
v.	NIL				
vi.	NIL				

INJURY CASE

25.	Name of the Injured	(i) Sankar Mishra (45 yrs.) S/O Shreekant Mishra (ii) Kajal Mishra (35 yrs.) W/O Sankar Mishra (iii) Ranjit Singha (36 Yrs.) S/O Surender Singha (iv) Gunjan Singha (32 Yrs.) W/O Ranjit Singha and all are IBN Rangpo Bazar PS-Rangpo East Sikkim.
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6.	Father's Name			
27.	Address of the Injured			
28.	Contact No. of Injured			
29.	Age / Date of Birth			
30.	Gender of the Injured			
31.	Marital status of the Injured			
32.	Occupation of the Injured	N/A		
33.	If the Injured was employed, give the name and address of the employer	N/A		
34.	Income of the Injured	N/A		
35.	Whether Injured assessed to Income Tax <i>If yes, file the copy of Income Tax Returns for the last three years</i>	Yes No		
36.	Nature and description of Injury	.....	
37.	Medical treatment taken by the Injured	YES		
38.	Name of hospital and period of hospitalization Hospital Name Period of Hospitalization Doctor's Name	GORUBATHAN BPHC		
39.	Details of surgery(s), if undergone	N/A		
40.	Whether any permanent disability <i>If yes, give details</i>	Yes No		
41.	Details of the family of the Injured			
	Name	Age / Date of Birth	Gender	Relation
i.	N/A			
ii.	N/A			
iii.	N/A			
iv.	N/A			
v.	N/A			
vi.	N/A			
42.	In case of children below the age of 18 years			

	Name of Child	Details of school and class of the child	Annual School fee	Approximate expenditure of the child
i.	N/A			
ii.	N/A			

iii.	N/A			
iv.	N/A			
v.	N/A			
vi.	N/A			
43.	Pecuniary Losses suffered			
i.	Expenditure on treatment			
ii.	If treatment is still continuing, give the estimate of expenditure likely to be incurred on future treatment			
iii.	Expenditure on conveyance, special diet, attendant charges, etc.			
iv.	Loss of income			
v.	Loss of earning capacity			
vi.	Any other pecuniary loss/ damage			
44.	Whether the injured got reimbursement of medical expenses from his employer or under a Mediclaime policy or under any government cashless treatment scheme or government insurance scheme If yes, provide details		Yes No	
45.	Value of loss/ damage to the property			
46.	Any additional information			
47.	Brief description of the accident			
48.	Compensation claimed			
49.	Hospital details			
i.	PMJAY Empanelled		Yes No	
ii.	Hospital name		STNM GANGTOK	
iii.	State		SIKKIM	
iv.	District		EAST	
v.	Address		SOCHETHANG GANGTOK	
vi.	Pincode			
vii.	Hospital Type		Government Private	
viii.	Classification (if Government)		Primary Health Centres Community Health Centres District Hospitals Medical Colleges and Research Institutions	
ix.	Speciality (if Private)		Multispecialty hospital	

		Allergy Anesthesia Bariatric Medicine/Surgery Burn/Trauma Cardiac Catheterization Cardiology Cardiovascular Surgery Dermatology Electrophysiology Emergency Medicine Endocrinology Family practice Gastroenterology General Surgery Geriatrics Gynecology/ oncology Hematology/ oncology Hepatobiliary Hospitalist Infectious Disease Internal medicine Interventional radiology Medical genetics Neonatology Neuroradiology Neurology Neurosurgery Nuclear medicine Obstetrics & Gynecology Occupational Medicine Ophthalmology Oral Surgery Orthopedics Otolaryngology / Head & Neck Surgery Pain Management Palliative Care Pathology: Surgical & Anatomic Pediatric Intensivist Physical Medicine
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		Plastic & Reconstructive Surgery Pediatric Surgery Psychiatry Pulmonary Medicine Radiation Oncology Radiology Rheumatology Surgical Oncology Thoracic Surgery Transplant Surgery Urology Vascular Surgery Wound Care ENT
x.	Mobile	N/A
xi.	National Identification Number (NIN)	N/A
xii.	Landline	N/A
xiii.	E-Mail	N/A
xiv.	Username	N/A
xv.	Password	N/A
xvi.	Retype Password	N/A
xvii.	Hospital Location	N/A
xviii.	Police District	N/A
xix.	Police Station	N/A
50.	Patient's details	
i.	Patient Type	Medico Legal Death – Out Patient(MLD-OP) Medico Legal Death - In Patient(MLD-IP)
ii.	In Patient/Out Patient	
iii.	Time of Arrival	N/A
iv.	Patient Name	N/A
v.	Patient Age	N/A
vi.	Patient Contact Number	N/A
vii.	Gender	Male Female TG
viii.	Injury Severity	Fatal Grievous Injury Simple Injury Hospitalized

		Simple Injury Non Hospitalized
ix.	Relation (if Male / TG)	Father Guardian
x.	Relation (if Female)	Father Mother Guardian
xi.	Father Name	
xii.	Patient Address	
xiii.	Accident Register Number	
xiv.	ID Proof	Voter ID PAN Card Aadhaar Card Driving Licence Others ID Proof Unavailable
xv.	ID Proof Number	
xvi.	Identification Mark 1	
xvii.	Identification Mark 2	
xviii.	Informant Name	
xix.	Informant Address	
xx.	Contact Number	
xxi.	Doctor Name	
xxii.	Doctor Regn. Number	
51.	Treatment details	
i.	Injured Part of Body	Back Injury Buttocks Injury Chest Injury Face Hand Head Hip Knee Leg Neck Not applicable Shoulders Injury Abdominal
ii.	Trauma Flag / Triage	Red Yellow

		Green Black No Pre-Arrival Intimation Not recorded or inadequately described
iii.	Injury Nature	Blunt Abdominal Trauma Cranial Trauma Fracture or Dislocation of Bone or Tooth Severe Coma Permanent Disfigurement of Head or Face Privation of any Member or Joint Wounds or Cut Degloving Injury
iv.	Level of Consciousness	Alert Drowsy Un Responsive
v.	Breathing	Spontaneous Breathing Non Spontaneous Breathing
vi.	Systolic BP (MM)	
vii.	Diastolic BP (MM)	
viii.	Pulse/Heart Rate (BPM)	
ix.	Respiratory Rate	
x.	SPO2 (%)	
xi.	Temperature (°F)	
xii.	Orientation	Oriented Disoriented
xiii.	Description of Pupil	Equal in Size - Normal Reaction Not-Equal Constricted Dilated and Fixed
xiv.	Physical Examination	Open or Closed suspected Skull Fracture Chest Injury including Pneumothorax Not recorded / Inadequately described Suspected Pelvic Injury Spinal Injury Crush Injury including Degloving Pre-hospital data unavailable Amputation proximal to wrist and make Penetrating to Head, Neck, Torso

v.	Treatment	Surgical Management Conservative Management
xvi.	Opinion Obtained	Cardiac Opinion ENT Opinion Gastro General Physician General Surgeon Internal Medicine Neurosurgeon Ophthalmology Ortho
xvii.	X Rays Done	Head/Skull Cervical Spine Thoracic spine Lumbar spine Chest Abdomen/pelvis Kidney, Ureter & Bladder Upper Limb Lower Limb X Ray Not done X Ray Not Needed Not recorded or Inadequately described
xviii.	CT Scan	Head/Skull Spine Chest Abdomen/pelvis Other CT Scan Not done CT Scan Not Needed Not recorded or Inadequately described Doppler ultrasound Fast extended focused Ultra Scan
xix.	Emergency Department Disposition	Discharged Home Left against medical advice Ward Transferred to another hospital Operation theatre

		Intensive care unit Died in Emergency Disposition Brought Dead
52.	History as stated by the Injured	
53.	Details of Injuries	
54.	Discharge Summary	
i.	Name of the doctor	
ii.	Doctor Regn No.	
iii.	Condition at admission	
iv.	Results of clinical investigation if any	
v.	Injuries diagnosed other than those noted in the Wound Certificate, if any	
vi.	Details of treatment given, including those of surgical and other procedures if any	
vii.	Condition at discharge	
viii.	Advice given at the time of discharge regarding further treatment if necessary	
ix.	Remarks if any	
55.	Drunkenness Certificate	
i.	Whether under arrest or not	Yes No
ii.	Consent	
iii.	Date & time of examination	
iv.	History	
v.	Smell of alcohol in breath	Present Absent
vi.	Speech	Normal Thick and slurred Incoherent
vii.	Clothing	Decently Dressed Disordered Soiled Torn
viii.	General Disposition	Calm Talkative Abusive Aggressive
ix.	Self Control	Normal Impaired
x.	Memory	Normal Impaired
xi.	Orientation of time & space	Normal Impaired
xii.	Reaction time	Normal Delayed
xiii.	Gait	Normal

		Unsteady Unable to stand upright
xiv.	Finger nose test	Positive Negative
xv.	Romberg's sign	Positive Negative
xvi.	Special examination (Blood & urine)	Preserved Not Preserved
xvii.	Reflexes	Normal Exaggerated Sluggish
xviii.	Any other findings / Injuries on the body	
56.	Postmortem Certificate	
i.	Alleged cause of death as per inquest	
ii.	Assisted by	
iii.	Medical Officer	
iv.	Remarks if any	

Documents to be submitted

In Death Cases:

1. Death certificate
2. Proof of age of the deceased which may be in form of (a) Birth Certificate; (b) School Certificate; (c) Certificate from Gram Panchayat (in case of illiterate); (d) Aadhar Card etc.
3. Proof of Occupation and Income of the deceased which may be in form of (a) Pay slip/salary certificate (salaried employee) (b) Bank statements of the last six months (c) Income tax Returns for last three years (d) Balance Sheet, etc.
4. Proof of the legal representatives of the deceased such as ration card, passport, etc.
5. In case of legal heirs below the age of 18, copy of school ID, proof of school fee, proof of other expenses/expense of the children.
6. Treatment record, medical bills and other expenditure prior to death
7. Bank Account no. of the legal representatives of the deceased near the place of their residence with name and address of the bank along with the necessary endorsement
8. Proof of reimbursement of medical expenses by employer or under a Mediciam policy, if taken
9. Any other document

In Injury Cases:

1. Multi angle photographs of the injured
2. Proof of age of the injured which may be in form of (a) Birth Certificate; (b) School Certificate; (c) Certificate from Gram Panchayat (in case of illiterate); (d) Aadhar Card etc.
3. Proof of Occupation and Income of the injured which may be in form of (a) Pay slip/salary certificate (salaried employee) (b) Bank statements of the last six months (c) Income tax Returns for the last three years (d) Balance Sheet, etc.
4. Treatment record, medical bills and other expenditure. In case of continuing treatment give proof of future medical expenditure.
5. Proof of absence from work where loss of income on account of injury is being claimed, which may be in the form of (a) Certificate from the employer; (b) Extracts from the attendance register.

6. In case of legal heirs below the age of 18, copy of school ID, proof of school fee, proof of other expenses/expenditure of the children
7. Bank Account no. of the injured near the place of his residence with name and address of the bank along with the necessary endorsement
8. Proof of reimbursement of medical expenses by employer or under a Mediclaim policy, if taken
1. Any other document Other documents to be submitted
1. X Ray
2. CT Scan
3. ECG
4. Other documents

Verification:

Verified at _____ on this _____ day of _____ that the contents of the above Form are true to my knowledge and the documents attached are true copies of the originals

Name and signature of the injured/legal representative of deceased			
S. No.	Name	Signature	Photograph
1.			
2.			
3.			
4.			
5.			
6.			

FORM-VII**DETAILED ACCIDENT REPORT (DAR)**

By Investigating Officer to Claims Tribunal within ninety (90) days of Accident
Copy to Victim(s)/ claimant(s), Driver, Owner, Insurance Company and SLSA

FIR No.	34/23
Date	07.10.23
Under Section	279/337/338 IPC
Police Station	LAVA

1.	Date of Accident	07.10.23	
2.	Time of Accident	10:15	
3.	Place of Accident	In between 9 th Mile Fatak Lava and Lava view point	
4.	Nature of Accident	Simple Injury Grievous Injury Fatal Damage/loss of the property Any other loss/injury	
5.	Offending Vehicle Details		
	Registration No.		SK-01-J-2365
	Make		Mahendra Bolero
	Model		2012
	Vehicle Type	Motorised 2-wheeler Auto Car/Jeep/Taxi Cycle Rickshaw Hand Drawn Cart Bicycle Tempo/Tractor Truck/Lorry Animal Drawn Cart Bus Heavy Articulated Vehicle/ Trolley Not Known Other (Specify)	
	Vehicle Use Type	Private Vehicle Commercial Vehicle Goods & Carriage Garbage Truck Taxi/Hired Vehicle Public Service Vehicle Educational Institute Bus Others (Specify)	

6.	Driver of offending vehicle		
	Name	BEETU PRASDA	
	Father's Name	SWAMINATH PRASAD	
	Mobile No.	9379693637	
	Address	RANGPO BAZAR PS-RANGPO EAST SIKKIM.	
	Driving Licence	Permanent Learner's Juvenile Without License Others (Specify)	
	Driving Licence No.	SK0120180002446	
	Validity of Licence	18.12.2038	
	Licensing Authority	RTO Gangtok East Sikkim.	
7.	Owner of offending vehicle		
	Name	SURESH BHAGAT	
	Father's Name	LT. S. BHAGAT	
	Mobile No.		
	Address	RANGPO BAZAR PS-RANGPO EAST SIKKIM.	
8.	Insurance Details of offending vehicle		
	Policy No.	N/A	
	Period of Policy	N/A	
	Name of Insurance Company	N/A	
9.	Whether License has been verified from the Authority. <i>If yes, attach report</i> <i>If no, give reasons</i>	Yes No	
10.	Whether Driving Licence suspended/ cancelled <i>If yes, give details</i>	Yes No	
11.	Whether driver injured during the accident <i>If yes, give details</i>	Yes No	
12.	Vehicle was Driven by	Owner Paid Driver Other (Specify)	

13.	Whether the Driver was driving under the influence of alcohol/ drugs <i>Whether findings based on scientific report. If yes, give details</i>	Yes No	
14.	Whether driver carrying mobile phone at the time of accident <i>If yes, give details of Mobile</i>	Yes No	
	Mobile No.	9379693637	
	IMEI No.		
	Make & Model		
15.	Whether driver previously involved in motor accident case(s) <i>If yes, whether case pending or decided by MACT? Give details of The FIR and MACT case</i>	Yes No	
16.	In case of commercial vehicle		
	Permit details	SIKKIM PERMIT VALID UPTO 10.05.2025	
	Fitness details	FITNESS UPTO 08.11.2023	
17.	Whether Permit and Fitness have been verified from the Authority <i>If yes, attach report If no, give reasons</i>	Yes No	
18.	Whether the Owner reported the accident to the Insurance Company <i>If yes, give date</i>	Yes No	
19.	In case the driver fled from spot, whether the owner produced the driver before the police <i>If yes, attach the copy of notice under Section 133 of Motor Vehicles Act.</i>	Yes No	
Victim(s) details			

20.	Victim(s)	Pedestrian/Bystander Cyclist Two-wheeler In other Vehicle Others (Specify)	
<u>DEATH CASE</u>			
21.	Name of the deceased		
22.	Age of the deceased		
23.	Occupation		
24.	Details of Legal Representatives of the deceased		
	Name	Relationship	Age
(i)			
(ii)			
(iii)			
(iv)			
(v)			
<u>INJURY CASE</u>			
25.	Name of the injured	i) Sankar Mishra (45 yrs.) S/O Shreekant Mishra ii) Kajal Mishra (35 yrs.) W/O Sankar Mishra iii) Bibash Bedant (12 yrs.) S/O Sankar Mishra iii) Ranjit Singha (36 Yrs.) S/O Surender Singha iv) Gunjan Singha (32 Yrs.) W/O Ranjit Singha all are IBN Rangpo Bazar PS-Rangpo East Sikkim.	
26.	Age	.....
27.	Occupation	.....
28.	Nature of Injury	.....
	Simple	.....
	Grievous	.....
29.	Details of Injury	ALL SIMPLE INJURY NON HOSPITALISED	
30.	Offences Charged		
	<u>Indian Penal Code, 1860</u>		
a.	Section 279	Rash driving or riding on a public way	
b.	Section 337	Causing hurt by act endangering life or personal safety of others	
c.	Section 338	Causing grievous hurt by act endangering life or personal safety of others	
d.	Section 304-A	Causing death by negligence	
e.	Any other offence		
	<u>Motor Vehicles Act, 1988</u>		
a.	Sections 3/181	Driving without license	
b.	Sections 4/181	Driving by minor	

c.	Sections 5/180	Allowing unauthorized person to drive	
d.	Section 182	Offences relating to licenses	
e.	Sections 56/192	Without fitness	
f.	Sections 66(1)/192A	Without permit	
g.	Sections 112/183(1)	Over speeding	
h.	Sections 113/194	Over loading	
i	Sections 119/184	Jumping red light	
j.	Sections 119/177	Violation of mandatory signs(One way, No right turn, No left turn)	
k.	Sections 122/177	Improper/ obstructive parking	
l.	Sections 146/196	Without insurance	
m.	Section 177/Rules of Road Regulation 17(1)	Violation of “One way”	
n.	Section 194(1A)/ Rules of Road Regulation 29	Carrying High/Long Load	
o.	Section 184/ Rules of Road Regulation, rule 6	Violation of “No overtaking”	
p.	Section 177/Central Motor Vehicles Rules, 1989 Rule 105	Without light after sunset	
q.	Section 179	Disobedience of orders,obstruction and refusal of information	
r.	Section 184	Driving dangerously	
s.	Section 184	Using mobile phone while driving	

t.	Section 185	Drunken driving/ drugs	
u.	Section 186	Driving when mentally or physically unfit to drive	
v.	Section 187	Violation of Sections 132(1)(a), 133 & 134	
w.	Section 190	Using vehicle in unsafe condition	
x.	Section 194A	Carrying more passengers than authorized	
y.	Section 194B/ Central Motor Vehicles Rules, 1989 Rule 138(3)	Driving without a safety belt	
z.	Section 194 C	Penalty for violation of safety measures for motorcycle driver and pillion rider	
a.a	Section 194 D	Penalty for not wearing protective headgear	
b.b	Section 194 E	Failure to allow free passage to emergency vehicles	
c.c	Section 194 F	Using the horn unnecessarily or in places where it is prohibited	
d.d	Section 197	Taking vehicle without authority	
e.e	Section 199A	Offence committed by juveniles	
f.f	Any other offence		
31.	Detailed description of the Accident		
32.	Direction(s) required from the Claims Tribunal		
i.	The driver of the offending vehicle has not furnished Form-III/has furnished incomplete Form-III, despite letter(s) dated .....[Copy (s) attached]. The driver be directed to furnish the Form-III before this Tribunal within 15 days.		
ii.	The owner of the offending vehicle has not furnished Form-IV/ has furnished incomplete Form-IV, despite letter(s) dated.....[Copy (s) attached]. The owner may be directed to furnish the Form-IV before this Tribunal within 15 days.		

iii.	The victim(s) of the accident has/have not furnished Form-VI/ Form-VIA/ has furnished incomplete Form-VI/ Form-VIA, despite letter(s) dated..... [Copy (s) attached]. The victim may be directed to furnish the Form-VI/ Form-VIA before this Tribunal within 15 days.	
iv.	The Registration Authority has not given the Verification Report despite letter(s) dated.....[Copy (s) attached]. The Registration Authority be directed to furnish the Verification Report directly before this Tribunal within 15 days.	
v.	The Hospital has not given the MLC/ Post Mortem report despite letter(s) dated [Copy (s) attached]. The Hospital be directed to furnish the above-mentioned documents directly before this Tribunal within 15 days.	
33.	Documents to be attached	
	Document	Attached Not Attached
i.	FIR	
ii.	Form-I - First Accident Report (FAR)	
iii.	Form-II - Rights of Victim(s) and Flow Chart	
iv.	Form-III - Driver's Form along with documents submitted	
v.	Form-IV - Owner's Form along with documents submitted	
vi.	Form-V - Interim Accident Report (IAR) along with documents submitted	
vii.	Form-VI- Victim's Form along with documents submitted	
viii.	Form-VIA - Details of minor children of the Victim along with documents submitted	
ix.	Form-VII- Detailed Accident Report (DAR)	
x.	Form-VIII - Site Plan	
xi.	Form-IX - Mechanical Inspection Report	
xii.	Form-X - Verification Report	
xiii.	Form-XI - Insurance Form along with documents submitted	
xiv.	Photographs of the scene of accident from all angles	
xv.	Photographs of all the vehicles involved in the accident from all angles	
xvi.	CCTV Footage of the accident	

xvii.	Report under section 173 of the Code of Criminal Procedure, 1973 (2 of 1974)		
xviii.	Copy of notice under section 133 of the Motor Vehicles Act, 1988		
	DEATH CASE		
xix.	Post-Mortem Report		
	INJURY CASE		
xx.	Medico Legal Case (MLC) form		
xxi.	Multi angle photographs of the injured		
	OTHER DOCUMENTS		
xxii.	Letter(s) of the Investigating Officer demanding the relevant information/ documents from the driver		
xxiii.	Letter(s) of the Investigating Officer demanding the relevant information /documents from the owner		
xxiv.	Letter(s) of the Investigating Officer demanding the relevant information/ documents from the Insurance Company		
xxv.	Letter(s) of the Investigating Officer demanding the relevant information/ documents from the Victim(s)		
xxvi.	Letter(s) of the Investigating Officer demanding the relevant information/ documents from the Registration Authorities		
xxvii.	Letter of the Investigating Officer demanding the relevant information/ documents from the Hospital		

Verification:

Verified at _____ on this _____ day of _____ that the contents of the above report are true and correct, and the documents were gathered during investigation.

S.H.O./I.O P.I.S./EMPLOYEE No. :

Phone No. : 8159030436

P.S.: Lava PS

Date: 08.12.2023

FORM- VIII**SITE PLAN**

**By Investigating Officer (through Roads & Highway Engineer) to Claims
Tribunal Along with DAR within ninety (90) days of Accident**

FIR No.	34/23
Date	07.10.23
Under Section	279/337/338 IPC
Police Station	LAVA

1.	Date of preparation of site plan	
2.	Type of collision(collision from)	Hit from back Vehicle to pedestrian Run-off road Vehicle overturn Head on collision Other (Specify)
3.	Road direction	One-way Two-way Other (Specify)
4.	No. of lanes	01
5.	Width of road	Not known
6.	Place of accident	INBETWEEN 9 TH MILE FATAK AND LAVA VIEW POINT
7.	Detailed Site Plan with road and junction name, direction and location of vehicle(s) on the road	
8.	Other details	
i.	Area Type	Rural Urban Sub-urban
ii.	Road Owning Agency	National Highway Under NHAI National Highway Under State PWD National Highway Under Other Departments Corporation Road Municipality Road Panchayat Union Road Panchayat Road

iii.	Type of Structure	<p>Normal Road</p> <p>Grade</p> <p>Road Over Bridge</p> <p>Culvert</p> <p>Road Under Bridge</p> <p>River Bridge</p> <p>Vehicular Under Pass</p> <p>Limited Use Subway</p> <p>Causeway</p>
iv.	Type of Road Surface	<p>Bituminous / Asphalt</p> <p>Water Bound Macadam (WBM) / Metalled Roads</p> <p>Paver Block Road</p> <p>Gravel Road</p> <p>Murum Road</p> <p>Earthen/Kutch Road</p>
v.	Surface Condition	<p>Good</p> <p>Reveling</p> <p>Loose</p> <p>Flooded</p> <p>Slippery/ Oily</p> <p>Muddy</p>
		<p>Corrugated / Wavy road</p> <p>Pot Holes</p> <p>Snowy</p> <p>Road Under Repair</p> <p>No Influence on Accident</p>
vi.	Type of Carriageway	<p>Single Lane (1 Way)</p> <p>Single Lane (2 Way)</p> <p>Immediate Lane</p> <p>2 Lane (1 Way)</p> <p>2 Lane (2 Way)</p> <p>3 Lane (1 Way)</p> <p>3 Lane (2 Way)</p> <p>4 Lane Undivided (2 Way)</p> <p>4 Lane divided (2 Way)</p> <p>6 Lane Undivided (2 Way)</p> <p>6 Lane divided (2 Way)</p> <p>8 Lane divided (2 Way)</p>

vii.	Accident Location	Straight Road At Junction Nearby Junction Horizontal Curve Vertical Curve Nearby Bus Stop
viii.	Horizontal Curve	Simple Curve Compound Curve Reverse Curve Deviation Curve Transition Curve
ix.	Vertical Curve	Symmetrical Crest / Summit Vertical Curve Unsymmetrical Crest / Summit Vertical Curve Symmetrical Sag Vertical Curve Unsymmetrical Sag Vertical Curve
x.	Junction Type	Round about Staggered Y-Junction Four-arm Square Junction More than Four-arm Elevated Junction (3-arm/4-arm) Four-arm Cross Junction
		Guarded Level Crossing Unguarded Level Crossing T-Junction
xi.	Junction Control	No Control Flashing Signal Give Way Sign Stop Sign Traffic Signals Manned Control
xii.	Sight Distance	Available to Junction Available to Curve Straight Reach Not Applicable
xiii.	Speed Limit	Below 40 40 – 60 60 – 80 80 – 90 Above 90 Not Available

xiv.	Road Margins	Shoulders Pedestrian / Cycle Track Bus Bay Guard Rails / Crash Barriers Service Lane Parking Lane Not Applicable
xv.	Type of Terrain	Plain Terrain (0 to 10%) Rolling Terrain (10 to 25%) Mountainous Terrain (25% to 60%) Steep Terrain (Above 65%)
xvi.	Type of Surface Gradient	Ruling Gradient Limiting Gradient Minimum Gradient Floating Gradient Exceptional Gradient Average Gradient
xvii.	Physical divider / Barrier	Yes No
xviii.	Type of Median	Depression / Flush Median Crash Barrier Flexible / Portable Divider Concrete Divider Raised Median with Anti-Glare Measures Raised Median without Anti-Glare Measures Kerb Median
xix.	Pedestrian Infrastructure	Footpath Footpath with Guard Rail Signalized Zebra Crossing Un Signalized Zebra Crossing Signalized Mid-Block Zebra Crossing Unsignalized Mid-Block Zebra Crossing Foot Over Bridge Subway Tabletop Crossing Not Applicable
xx.	Ongoing Road Work	Yes No
xxi.	Road Markings	Available Faded Not Available

xxii.	Road Sign Board	Available and Reflective Available and Non Reflective Not Available
xxiii.	Factors of Road Accident	Road Obstructions Uneven Road Surface Slippery Road Surface Narrow Width Non Provision of Parapets / Crash Barrier Inadequate Sight Distance Illegal Parking / Abandoned Vehicle Road / Building Construction Work Blind Curve Not Applicable

S.H.O./I.O P.I.S./EMPLOYEE No. :

Phone No. : 8159030436

P.S.:Lava PS

Date: 08.12.2023

FORM- IX**MECHANICAL INSPECTION REPORT**

By Investigating Officer (through Motor Vehicle Inspector) to Claims Tribunal
Along with DAR within ninety (90) days of Accident

FIR No.	34/23	
Date	07.10.23	
Under Section	279/337/338 IPC	
Police Station	LAVA	

Date of Mechanical Inspection	16.10.23
Name of Motor Vehicle Inspector	SANJIB ROY MECHANICAL ENGINEER
Registration No. of Motor Vehicle Inspector	029700-3

1.	Vehicle Registration No.	SK-01-J-2365
2.	Vehicle Type	Motorized 2-wheeler Auto Car/Jeep/Taxi Cycle Rickshaw Hand Drawn Cart Bicycle Tempo/Tractor Truck/Lorry Animal Drawn Cart Bus Heavy Articulated Vehicle/ Trolley Not Known Other (Specify)
3.	Vehicle make	(a) Registration no: SK-01-J-2365. (b) Engine no: Chassis no:
4.	Model Name	MAHENDRA BOLERO
5.	Colour of vehicle	WHITE
6.	Engine Number	GHC4K76608.
7.	Chassis Number	MAA1WG2GHKC2K91011
8.	Location of vehicle inspection	
	Accident Site	LAVA POLICE CAMP
	Garage	
	Other (Specify)	

9.	In case of Commercial Vehicle	
	Details of Fitness	
	Details of permit	
10.	Evidence of Impact 1 (Paint Transfer)	
	Paint Transfer found	Yes No
	Colour of Paint Transfer	
	Location of Paint Transfer	
11.	Evidence of Impact 2 (Scratch marks/ Others)	
	Type of scratch	
	Location of scratch	
12.	Point of Impact	
13.	Mechanical condition of Vehicle	
	Steering	NORMAL
	Wheels	NORMAL
	Wipers	NORMAL
	Mirrors	NORMAL
	Others	
14.	Whether vehicle modified by	
	Installing CNG/LPG Kit	
	Change of vehicle body	
15.	Condition of Tyres	Original Retreaded
16.	Horn	
	Whether installed	Yes No
	If yes, whether functional	Yes No
17.	Brake lights & other lights functional	Yes No
18.	Whether vehicle had faulty number plate	Yes No
19.	Status of Airbags	
	Whether the vehicle fitted with airbags	Yes No
	If yes, whether airbags were deployed	Yes No
20.	For educational institution bus, whether the vehicle was fitted with the doors that can be shut & whether the vehicle had a suitable inscription to indicate that they are in the duty of an educational institute	
21.	Whether vehicle had tinted glasses	Yes No
22.	Speed Limiter Devices in cases of PSVs (Commercial Vehicles)	
	Whether vehicle fitted with Speed Limiter	Yes No
	If yes, whether functional	Yes No

23.	Parking Sensors	
	Whether Rear Parking Sensors installed	Yes No
	If yes, whether functional	Yes No
24.	Vehicle Location Tracking (VLT) Devices	
	Whether installed	Yes No
	If yes, whether functional	Yes No
25.	Description of damage (including internal & external damage and estimated cost of damage)	
26.	Other details	
i.	Vehicle Category	Motorized Non-motorized
ii.	Registration Number Status	Known Unknown Without Registration
iii.	Registration Number Status	Permanent Registration No. Temporary Registration No. Trade Certificate No. None Obtained
iv.	Load Category	Passengers Goods
v.	Year of Manufacture	
vi.	Age of vehicle	
vii.	Vehicle Description	Transport Vehicle Non-transport Vehicle
viii.	Pollution under Control Certificate Validity	
ix.	Tax Details	
x.	Seat Capacity	
xi.	Insurance Company	
xii.	Disposition	Can be driven away Need to be towed Cannot be towed
xiii.	Manoeuvre at Accident	Turning Right Turning Left Overtaking from left Making U turn Going ahead overtaking Going ahead not overtaking Parked Reversing

		<p>Sudden Start</p> <p>Starting from off side</p> <p>Starting from near side</p> <p>Sudden Stop</p> <p>Merging</p> <p>Diverging</p> <p>Stationary</p> <p>Using Private Entrance</p> <p>Parking Vehicle</p> <p>Temporarily Held Up</p>
xiv.	Vehicle Damage	<p>Rear Damage</p> <p>Front Damage</p> <p>Top Damage</p> <p>Left Damage</p> <p>Right Damage</p> <p>Multiple Damage</p> <p>No Damage</p> <p>Total Damage</p>
xv.	Accused/ Victim	<p>Accused Vehicle</p> <p>Victim Vehicle</p> <p>Not Known</p>
xvi.	Brake Type	<p>Air Brake</p> <p>Hydraulic</p> <p>Mechanical</p> <p>Vaccum Assisted Hydraulic Brake</p>
xvii.	Condition of Brake	<p>Air Brake</p> <ul style="list-style-type: none"> • Satisfactory • Want of air • Leakage of air • Worn out parts <p>Hydraulic</p> <ul style="list-style-type: none"> • Satisfactory • Want of fluid • Leakage of fluid <p>Mechanical</p> <ul style="list-style-type: none"> • Satisfactory • Worn out parts • Lack of Lubrication

		<ul style="list-style-type: none"> Slackness in adjustment Vaccum Assisted Hydraulic Brake <ul style="list-style-type: none"> Satisfactory Want of fluid Leakage of fluid Want of air Leakage of air Worn-out parts
xviii.	Condition of Foot Brake	Active Inactive
xix.	Condition of Hand Brake	Active Inactive
xx.	Brakes Even or Not	Even Not even
xxi.	Mechanical Failure	Yes No
xxii.	Tyre Condition	Worn Out In Order Remoulded Original Satisfactory Bald Wear Bead Separation Belt Separation Bent Bead Broken Bead Feathering Wear Shoulder Separation Tyre Puncture Sidewall Cut Letter Defect Cracking Between Tread Flat Spot Wear One side wear Sidewall Bubble Tread Separation Mushroomed Tread Rapid Shoulder Wear Rapid Centre Wear Tyre Burst/Blowouts Cupping / Scalloped Wear Damaged Bead Sidewall Tear

		Sidewall Wear
xxiii.	Mechanical	Wornout parts Lack of lubrication Defective parts Slackness in adjustment
xxiv.	Vehicle Defect Type	No defect Bald tyre Brakes Head Lights Steering Tyre puncture Multiple defects None of these
xxv.	Accident Due to	Vehicle Defect Road Defect Both Vehicle and Road defect Not a Mechanical Defect Opinion cannot be given None of the above
xxvi.	Steering Type	Electronic Hydraulic Mechanical
xxvii.	Steering Condition	Free Not Working Working In order
xxviii.	Condition of Wheels	Satisfactory Wheel Rim Bent Wheel Rim Damaged
xxix.	Whether Vehicle Modified	Yes No
xxx.	Whether Rear Parking Sensors Installed	Yes No
xxxi.	Type of Scratch	No Scratch Marks Found Paint Scratch Marks Found Not Found
xxxii.	Damage Status	Rear Damage Front Damage Top Damage Left Damage Right Damage

		Multiple Damage No Damage Total Damage
xxxiii.	Vehicle had a faulty Number plate?	Yes No
xxxiv.	Run Protection Device and Side Under Run Protection Device	Yes No
xxxv.	Bull Bars	Yes No
xxxvi.	Reflective Tapes	Yes No
xxxvii.	Wind Screen Safety	Yes No
xxxviii.	Track Mark	Yes No
xxxix.	Check Report Issued?	Yes No

1. Photographs of the vehicle Images/ Videos to be attached:

1. Main Resting Place of Vehicle
2. Damage to Vehicle
3. Damage to Property

**Motor Vehicle
Inspector Date :**

DATE : 08.12.2023

FORM-X**VERIFICATION REPORT**

By Investigating Officer to Claims Tribunal Along with DAR within ninety (90) days of
Accident through information available on VAHAN Database

FIR No.	34/23
Date	07.10.23
Under Section	279/337/338 IPC
Police Station	LAVA

1.	Vehicle Registration No.	SK-01-J-2365
	Validity Period	
2.	Engine No.	
3.	Chassis No.	
4.	Category of Vehicle	LMV/ HMV/MGV Private or Commercial
5.	Vehicle Make & Model	
	Make	MAHENDRA
	Model	2012
6.	Owner Details	
	Name	SURESH BHAGAT
	Address	RANGPO BAZAR PS-RANGPO EAST SIKKIM
7.	Details of Insurer	N/A
8.	Details of Permit	SIKKIM PERMIT
	Permit No.	11041-1137
	Validity	10.05.2025
9.	Details of Fitness Certificate	
	Fitness Certificate No.	SK1R2210000001567/SK22152291817
	Validity	22.11.2023
10.	In case record not available, state reasons	

S.H.O./I.O

Phone No. : **8159030436**

LAVA PS, KALIMPONG

Date: 08.12.2023

(CHARGE SHEET / FINAL REPORT)
(Under Section 173 Cr.P.C.)

IN THE COURT OF : **Ld. Chief Judicial Magistrate, Kalimpong**

1. Dist. **Kalimpong** P.S. **Lava** Year **2023** FIR No. **34/2023** Date: **07.10.2023**
2. Final Report/Charge Sheet No **29** /2023
3. Date **27/12/2023**
4. (i) Act **IPC**.....Sections**279/337**
- (ii) Act Sections.....
- (iii) Act Sections.....
- (iv) Other Act and Sections
5. Type of Final Report: Charge Sheet / Untraced/ Not Charge-Sheeted for want of evidence...**Charge Sheet**
- If F.R. Un-occurred: False / Mistake of fact / Mistake of Law / Non-Cognizable / Civil nature
6. If Supplementary or Original...**Original**.....
7. Name, Rank and Number (if any) of the I.O.(s)....**ASI Phatik Chandra Barman**.....
8. (a) Name of Complainant / Informant **Mani Tamang**
- (b) Father Name **Lt. B.B. Tamang**
9. Date on which the complainant/Informant was informed of the result :
10. Details of properties /Articles/Documents recovered/Seized during investigation and relied Upon (separate sheet can be attached, if necessary):

Sl. No	Property Description	Estimated Value (in Rs)	P.S. Property Register No.	From whom /where Recovered or Seized	Disposal
1	(i) One offending vehicle bearing regd. No.SK-01-2365 (Bolero) along with its key. (ii) one original fitness certificate of offending vehicle bearing regd. No.SK-01-2365 valid upto 08.11.2023 (iii) one original token tax of offending vehicle bearing regd. No.SK-01-2365 (iv) One PUC Certificate of offending vehicle bearing regd. No.SK-01-2365 valid upto 09.03.2023. (v) One Original Sikkim permit of the offending vehicle bearing regd. No.SK-01-2365 valid upto 10.05.2025. (vi) One original Driving Licence bearing No.SK-01-20180002446 of driver of the offending vehicle namely Beetu Prasad S/O Swaminath Prasad of Rangpo East sikkim Valid upto 18.12.2038.	....	49/23	On being produced by the driver of the offending vehicle	Zimmanama on 16.10.23 except Driving Licence

A. Number of Accused Persons Charge – Sheeted. – 01(one)

B. Number of Accused Persons not Charge – Sheeted. – Nil

12 Particulars of accused persons Charge-Sheeted –
Name : Beetu Prasad S/O Swaminath Prasad.

i) Date/Year of Birth: : 15.06.1997

ii) SexMale.....

iii) Nationality.....Indian.....

iv) ReligionHindu.....

v) Whether SC/ST

vi) OccupationDriver.....

viii) Address... Rangpo Bazar PS-Rangpo, East Sikkim.

ix) Provisional Criminal..... No.....

x) Regular CriminalNo.....

xi) Date of surrender : 09.10.2023

xii) Date of release on bail 09.10.2023

xiii) Date on which forwarded to Court

xiv) Under Acts and Section:

xv) Name (s) and Address (s) of sureties.....

xvi) Previous convictions with case reference

xvii) Forwarded /Bailed by Police/Under Police Custody/ Bailed by Court/In Judicial
Custody/ Absconding/Proclaimed OffenderBail by Court...

Particulars of accused persons not charge-sheeted (Suspected):

(i) Name

(ii) Father's/Husband's
Name.....

(iii) Date/Year of
Birth.....

(iv) Sex

(v) NationalityNIL.....

(vi) Religion:

(vii) Whether SC/ST

(viii) Occupation

(ix) Address.....

(x) Provisional Criminal No Yes/No

(xi) Suspicion Approved

(xii) Forwarded /Bailed by Police/Bailed by Court/ In Judicial Custody/Absconding
/Proclaimed
Offender.....

(xiii) Under Acts and Sections

(xiv) Any Special remarks including reasons for not charge-
Sheeting.....

(Attach Separate Sheet, if necessary)

14. Particulars of witnesses to be examined:

Sl. No.	Name	Father's/ Husband's Name	Date/Year Of Birth	Occupation	Address	Type of evidence To be tendered
1.	Mani Tamang	S/O Lt.B.B. Tamang	of Lava Bazar, PS-Lava, Dist: Kalimpong	(Complainant)		
2.	Sankar Mishra	S/O Shreekant Mishra	of IBM Rangpo Bazar PS-Rangpo East Sikkim	(Victim)		
3.	Ranjit kr. Singha	S/O Surender Singha	of IBM Rangpo Bazar PS-Rangpo East Sikkim	(Victim)		
4.	Gunjan Singha	W/O Ranjit Singha	of IBM Rangpo Bazar PS-Rangpo East Sikkim	(Victim)		
5.	Kajal Mishra	D/O Sankar mishra	of IBM Rangpo Bazar PS-Rangpo East Sikkim	(Victim)		
5.	C/415- Animesh Singha	of Lava PS, Kalimpong	(seizure witness)			
6.	CV/225- Dhandup Bhutia	of Lava PS, Kalimpong	(seizure witness)			
7.	Sanjib Roy	of Panpara Jalpaiguri	(Mechanical Expert)			
8.	Dr. Saikat Kar	of Medical officer (WNHS) Gorubathan BPHC, Kalimpong	(M.O.)			
9.	SI. Laxman Pokhrel	OC Lava PS, Kalimpong	(R.O.)			
10.	ASI Phatik Chandra Barman	of Lava PS, Kalimpong	(I.O)			

All may kindly be summoned during the trial of the case.

15. If FIR is false, indicate action taken or proposed to be taken U/S 182/211 IPC.....

16. Result of laboratory analysis: NIL

17. The Fact of the case in brief is that on 07.10.2023 received a written complaint from one Mani Tamang S/O B.B. Tamang of Lava Bazar PS:Lava to the effect that on 07.10.23 at around 10:15 hrs he was traveling Lava view Point and he saw one vehicle bearing Regd. no. SK - 01-J 2365 (Bolero) met an accident in between Lava view Point and 9th mile fatak which was coming from Rangpo towards Siliguri. There was 7-8 passengers in the vehicle. Driver of the vehicle named Beetu Prasad S/O Swaminath Prasad of Rangpo East Sikkim and Some passengers got small injuries and doing their first aid then after the said vehicle's passengers were shifted to another vehicle to reach their destination. Over the written Complaint started Lava PS Case no: 34/23, Dated: 07.10.2023, U/S 279/337/338 of IPC and endorsed to me for its investigation case.

Dispatched ata.m./p.m.

Forwarded.
[Signature]

27/12/2023
Officer - In - Charge
Lava Police Station
District Kalimpong

ASI Phatik Chandra Barman
Lava P-S Kalimpong

Signature of the Investigation Officer
Submitting the Final report/Charge Sheet
Name: ASI Phatik Chandra Barman
Rank: ASI of Police
Date: 27/12/2023

Continued from Col no 17.....

During investigation of the case I visited the P.O, and prepared the rough sketch map with index of the P.O and Seized the offending vehicle along with documents and its key. I also examined the complainant and recorded U/S 161 Cr.P.C. I served the notice U/S 41 A Cr.P.C to the driver of the offending vehicle bearing no.SK-01-J-2365 namely Beetu Prasad S/O Swaminath Prasad of Rangpo Bazar PS-Rangpo East Sikkim. I also served the notice 133 M.V. Act to the actual owner of the offending vehicle namely Suresh Bhagat S/O Lt. S. Bhagat of Rangpo Bazar PS-Rangpo East Sikkim.

During investigation I sent the requisition to Sanjib Roy Mechanical expert of Panpara Jalpaiguri and I collect the mechanical report from Mechanical expert, Sanjib Roy of Panpara Jalpaiguri and he opined that the accident occurred due to other than mechanical failure. I also examined victims and recorded U/S 161 Cr.P.C in separate sheet of papers

Particulars of witnesses

1. Sankar Mishra S/O Shreekant Mishra of IBM Rangpo Bazar PS-Rangpo East Sikkim.
2. Ranjit kr. Singha S/O Surender Singha of IBM Rangpo Bazar PS-Rangpo East Sikkim.
3. Gunjan Singha W/O Ranjit Singha of IBM Rangpo Bazar PS-Rangpo East Sikkim.
4. Kajal Mishra D/O Sankar mishra of IBM Rangpo Bazar PS-Rangpo East Sikkim.

During investigation I received an order sheet no.02 Dt.09.10.2023 regarding accused Beetu Prasad @ Bittu voluntarily surrendered before the Ld. Court and call for report regarding the release of sized vehicle bearing no.SK- 01-J- 2365.

During investigation I received a order sheet no.03 Dt.16.10.2023 and Bond Zimmanama regarding release of offending vehicle bearing no.SK-01-J-2365 (Bolero) along with documents except driving Licence and I gave zimma the offending vehicle bearing no.SK-01-J-2365 along with documents except driving Licence to the petitioner Santosh Prasad Shah under proper Zimmanama.

During investigation I collected the injury report from Medical Officer of Gorubathan BPHC of the following victims persons namely (1) Sankar Mishra S/O Shreekant Mishra of IBM Rangpo Bazar PS-Rangpo East Sikkim.(2) Ranjit Kr. Singha S/O Surender Singha of IBM Rangpo Bazar PS-Rangpo East Sikkim (3) Gunjan Singha W/O Ranjit Singha of IBM Rangpo Bazar PS-Rangpo East Sikkim (4) Kajal Mishra D/O Sankar mishra of IBM Rangpo Bazar PS-Rangpo East Sikkim and Dr. Saikat Kar of Medical officer (WNHS) Gorubathan BPHC, Kalimpong opined the nature of injury is simple.

However, investigation of this case is almost complete, I consulted with my superior regarding the results of the investigation and I was instructed to me submit charge sheet.

Since prima facie charge has been well established against accused person namely Beetu Prasad S/O Swaminath Prasad of Rangpo Bazar, PS-Rangpo East Sikkim U/S 279/337 of PC as the section 338 IPC could not be established during the course of investigation. As the nature of injury on the persons were not grievous in nature according to the nature of medical findings.

Therefore I am submitting Charge Sheet, vide Lava PS Charge Sheet no...²⁹...../23 dated ²⁷...../12...../2023.. U/S 279/337 of IPC against the accused person namely Beetu Prasad S/O Swaminath Prasad of Rangpo Bazar PS-Rangpo East Sikkim to face his trial open court of Law.

Witnesses may kindly be summoned to prove the case

The complainant has been informed about the result of investigation.

Submitted

ASI Phatik Chandra Barrman
Lava P.S. Kalimpong
(ASI Phatik Chandra Barrman)
PS-Lava Dist: Kalimpong
27/12/2023.