

FORM 54
[See rule 150(1) and (2)]
ACCIDENT INFORMATION REPORT

- | | |
|---|--|
| 1. Name of the Police Station | Kalimpong Police Station |
| 2. CR No./Traffic accident report | Kalimpong P.S. case No 160/23 dtd. 12/12/2023
u/s 279/337/338 IPC. |
| 3. Date time and place of the accident | 11/12/2023 at 17.30 hrs at Antarey Khola Near
elli Bazar, NH-10, PS/Dist. Kalimpong. |
| 4. Name and full address of the
Deceased | Nil |
| 5. Name of the hospital to which he/she
was removed | |
| 6. Registration number of vehicle and
the type of the vehicle | (1) WB 73D 5355 Bolero Pick Up (Offending
vehicle) &
(2) SK 01PC 2801 Activa 125 Scooty (victim
vehicle). |
| 7. Driving licence particulars | |
| (a) Name and address of the driver | - |
| (b) Driving licence number and date
 of expiry | - |
| (c) Address of the issuing authority | - |
| (d) Badge No in case of public
 service vehicle | N/A |
| 8. Name and address of the owner of
The vehicle at the time of the accident | - |
| 9. Name and address of the insurance
Company with whom the vehicle was
Insured and the particulars of the | - |
| 10. Number of insurance policy/
Insurance certificate and the
Date of validity of the insurance
Policy/insurance certificate | - |

**11. Registration particulars of the
Vehicle (class of vehicle)**

(a) Registration No

**WB 73D 5355 (Offending vehicle)
and SK 01PC 2801 (victim vehicle)**

**(b) [Engine Number or Motor
Number in the case of Battery**

(C) Chassis No.

12. Route permit particulars

13. Action taken. If any and the result

Investigation proceeding.

Submitted

Ben
13/12/2023

(Asi Samir Lepcha)
Melli OP
PS Kalimpong

FIRST INFORMATION REPORT

(Under Section 154 Cr. P.C.)

4610

P.S. Kalimpang Year 2023 FIR No. 160 Date 12/12/23
 Sections ii) Act I.P.C. Sections 279/337/338

Sections (iv) Others Acts & Sections

Time Period Date From 11/12/23 Date To 05.30 P.M.

Information received at P.S. Date 12/12/2023 Time 15.05 hrs.

(c) General Diary Reference : Entry No(s) 453 Time 15.05 hrs.

Type of Information : Written / Oral
 Place of Occurrence : (a) Direction and Distance from P.S. Antarjhar / North 19 km Beat No. J.L. No-02

(d) Address

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

Name of the P.S. District

Complainant / Informant :

(a) Name Binod Shah

(b) Father's / Husband's Name late - Shish Nath perasad

(c) Date / Year of Birth (d) Nationality

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

(f) Occupation

(g) Address Meeli Bazar, P.S + Dist - Kalimpang.

Details of known / suspected / unknown accused with full particulars

(Attach separate sheet, if necessary) :

Reasons for delay in reporting by the Complainant / Information

Particulars of properties stolen / involved (Attach separate sheet, if necessary) : Pickup vehicle WB-73D/5355
and Skooty Bearing No-SK01PC/2801

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 for perusal over
leaf.

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 ASI - Samir Lepcha to take up

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

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

Informant free of cost.

14. Signature / Thumb impression
 of the Complainant / Informant

15. Date & Time of despatch to the court :

Signature of the Officer-in-Charge

Name : SANKAR DEY

Rank : No. SI. of Police

KALIMPONG POLICE STATION

To O.C Melli O/P
Melli Bazar
Kalimpong W.B

Received on 12/12/23 at 15:05 hrs
Kalimpong P.S. G.D.E.
No-453/2023
Started Kalimpong
P.S. Case No-160/23
Dt-12/12/2023
279/337/338 I.P.C.

OFFICER-IN-CHARGE
MALLI OUT POST
P.B. KALIMPONG

Inspector - In-Charge
Kalimpong Police Station
Dist. Kalimpong

महोदय,

म विनोद साहू S/O Lt शिवनाथ प्रसाद मल्ली बजार निवासी थाना अति जिम्मा कालिम्पोङ, तपोई लाई या लिखित जानकारी गराऊ चाहें हैं कि दिनांक 11/12/2023 कागजात सांक 15/30 केजे म केही काम विषय मल्ली के अन्तरी मोड़ बाटो के काम भइरहेको जग्गामा बाएकी थिएर ल्यात समय सिलगुजा लक कार एउटा PICUP गाडी नं० WB 53555 खुले जगतिमा आइरहेको दुई थुला बाईको विचमा पल्लुगो थपे सक्नु एउटा खुले जगतिमा नं० SK01PC2801 बाईमा कटोरहेको थियो थपल्लाई को PICUP गाडिले चक्का बाटो लो खुलेको जगतिमा अति अल को पछि कसेको एक जव्वा महिला ले गम्भीर रूपमा चोट लाग्यो अनि हाडीहरू ले तिनीहरू लाई चिकित्सा के निमित्त पारी सिक्किम स्पिटल पराया, लो PICUP गाडी को हाडभरको लागपवायो ले गर्दा नया घटना भएको ले यही घटनाको एकर मल्ली W.B पुलिस लाई भए पछि उवाचु भएर हाड्डालगाई लो PICUP VAN गाडी दतिग्रास्त भएको खुले र दरफर भएको सक्नेछि ठडार लो PICUP गाडीमा चालेर लै जाउ भयो।

मल्ल विहान भैरु ~~मल्ली~~ बानिसहरूको मुखबाट हुँदा लो चोचिल भएको पुक्ती सिक्किम के मनिपाल HOSPITAL मा भर्ती छ भाने।

अर्को हजुरलाई अनुरोध गर्दछु कि यस घटनाको भाडा अनुसार ~~मल्ली~~ व्यवस्था मारी दिनु हक भनि।

तपोई के विशक
Melli Bazar
629552950

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.	KP4 PS case No 160/2023	
Date	12.12.2023	
Under Section	279/337/338 IPC	
Police Station	Kalimpong PS	
1.	Date of Accident	11.12.2023
2.	Time of Accident	17.30 hrs
3.	Place of Accident	Antarey Khola Melli NH-10
4.	Source of Information	Driver/Owner Victim Witness Hospital Good Samaritan Police Others (Specify) ✓
Name, mobile number & address of the Informant		
Name		Binod Sahu
Mobile No.		6295552950
Address		Melli Bazar, PS/Dist Kalimpong
5.	Nature of Accident	Injury ✓ Fatal Damage/loss of property ✓ Any other loss/injury
Number of Vehicles involved		02 (Two)
Whether Registration Number of the Offending Vehicle known		Yes ✓ No
Whether offending Vehicle impounded by the police		Yes ✓ No
Whether the driver of the offending vehicle found on the spot		Yes No ✓
Number of Fatalities		NIL
Number of Injured		02 (Two)
6.	Details of the Hospital where victim(s) taken	
Hospital Name		Melli Primary Health Centre
Address		Melli bazar South Sikkim
Doctor's Name		

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.	WB 73 D 5355	SKOIPC 2801
	Driver Details		
	Name of the Driver	Ramesh Tammam	
	Market Zone		

Address of Driver		Akuboley Majura PS Nayabazar Sikkim
Mobile No. of Driver		9733291360
Owner Details		
Name of the Owner		- DO -
Address of Owner		- DO -
Mobile No. of Owner		- DO -
Insurance Details		

Insurance Policy No.			
Period of Insurance Policy			
Name of Insurance Company			
Address of Insurance Company			
9. Details of Victim(s)			
	Name	Deceased /Injured	Address & Contact Details
i.	Ramesh Tamang	Injured	Akuboley Majura PS Nayabazar Sikkim 9733291360
ii.	Sabang Lumbi	- do -	Akuboley Majura PS Nayabazar Sikkim 9733291360
iii.			
iv.			
v.			
vi.			
10. Other Accident Details			
i.	Reporting Date & Time	12.12.2023 at 14.15 hrs.	
ii.	Landmark	Near Melli bazar NH-10	
iii.	Severity	Fatal Grievous Injury ✓ Simple Injury Hospitalized Simple Injury Non Hospitalized No Injury	
iv.	Count of	Injured	Death
	Drivers	01	Nil
	Passengers	01	Nil
	Pedestrians	Annu Chakraborty	
	Animal		
v.	Collision Type	Vehicle to Vehicle ✓ Vehicle to Pedestrian Vehicle to Bicycle Vehicle to Tricycle Vehicle to Animal Driven Cart Vehicle to Animal	

vi.	Collision Nature	Head on Collision Hit Parked Vehicle Hit tree Hit Fixed/Stationary Object Hit from Back ✓ Hit from Side Run off Road Overturn ✓ Skidding /Overturn Sideswipe Vehicle Fell in Gorge/Ditch/Well Vehicle Fell in River
vii.	Initial Observation of accident scene	Non Provision of Parapets/Crash Barrier on Outer Curve Long Distance Covered/Driver Restless
		Fell Down From Vehicle Illegal Parking on Road Blind Bend / Curve Alcohol abuse Carrying people in loaded vehicle Changing 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 / Clear Cloudy Light Rain Heavy Rain Flooding of Causeway / Rivulets Hail/ Sleet

		Strong Wind Strong WindCold Hot
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

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

~~S.H.O./I.O~~

Phone No. : 9932371025

P.S. : Kalumpang Date

Melli OP

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-II

RIGHTS OF VICTIM(S) OF ROAD ACCIDENT AND FLOW CHART OF THE SCHEME MENTIONED BELOW

**To be handed over by Investigating Officer to the
Victim/Family Members/Legal Representatives within 10 days of the accident**

1. Right to immediate medical aid and treatment.
2. Right to copy of FIR. ✓
3. Right to copy of First Accident Report (FAR) in Form - I. ✓
4. Right to copy of Rights of Victim and Flow Chart of this Scheme in Form -II. ✓
5. Right to copy of Driver's Form-III along with the documents.
6. Right to copy of Owner's Form-IV along with the documents.
7. Right to copy of Interim Accident Report (IAR) in Form-V along with the documents.
8. Right to blank copy of format of Victim's Form-VI and Form-VIA.
9. Right to copy of Detailed Accident Report (DAR) in Form-VII along with the documents.
10. Right to copy of Insurance Form-XI.
11. Right to copy of Report under section 173 of the Code of Criminal Procedure, 1973 (2 of 1974).
12. Right to copy of Victim Impact Report in Form-XII.
13. Right to copy of MLC and Postmortem Report.
14. Right to free legal aid from State Legal Services Authority.
15. Right to appear before the Claims Tribunal in person or through lawyer.
16. Right of a minor child/ children (18 years or below) of the victim to be referred to the Child Welfare Committee by the IO for Inquiry into their needs and status.
17. Right of a minor child/ children (18 years or below) of the victim to have the Child Welfare Committee conduct an Inquiry through the District Child Protection Officer into their well-being, medical needs, security, nutrition, etc.
18. Right of a minor child/ children (18 years or below) of the victim to get all benefits of Juvenile Justice (Care and Protection of Children) Act, 2015 in case the Child Welfare Committee returns a finding of a child being a Child in Need of Care and Protection (CNCP).
19. Right of such minor child/children of the Victim to be placed in a Children's Home in case both the parents died or the surviving parent is unable to take care of the child, as provided under the Juvenile Justice (Care and Protection of Children) Act, 2015.
20. Right to receive compensation under the Scheme for Motor Accident Claims formulated by the Delhi High Court.

Flow Chart of the aforesaid Scheme is attached herein.

S.H.O./I.O

P.I.S./EMPLOYEE No. : _____
Phone No. : 9932371025
P.S. : Kalunpoung
Date : 16/12/2023

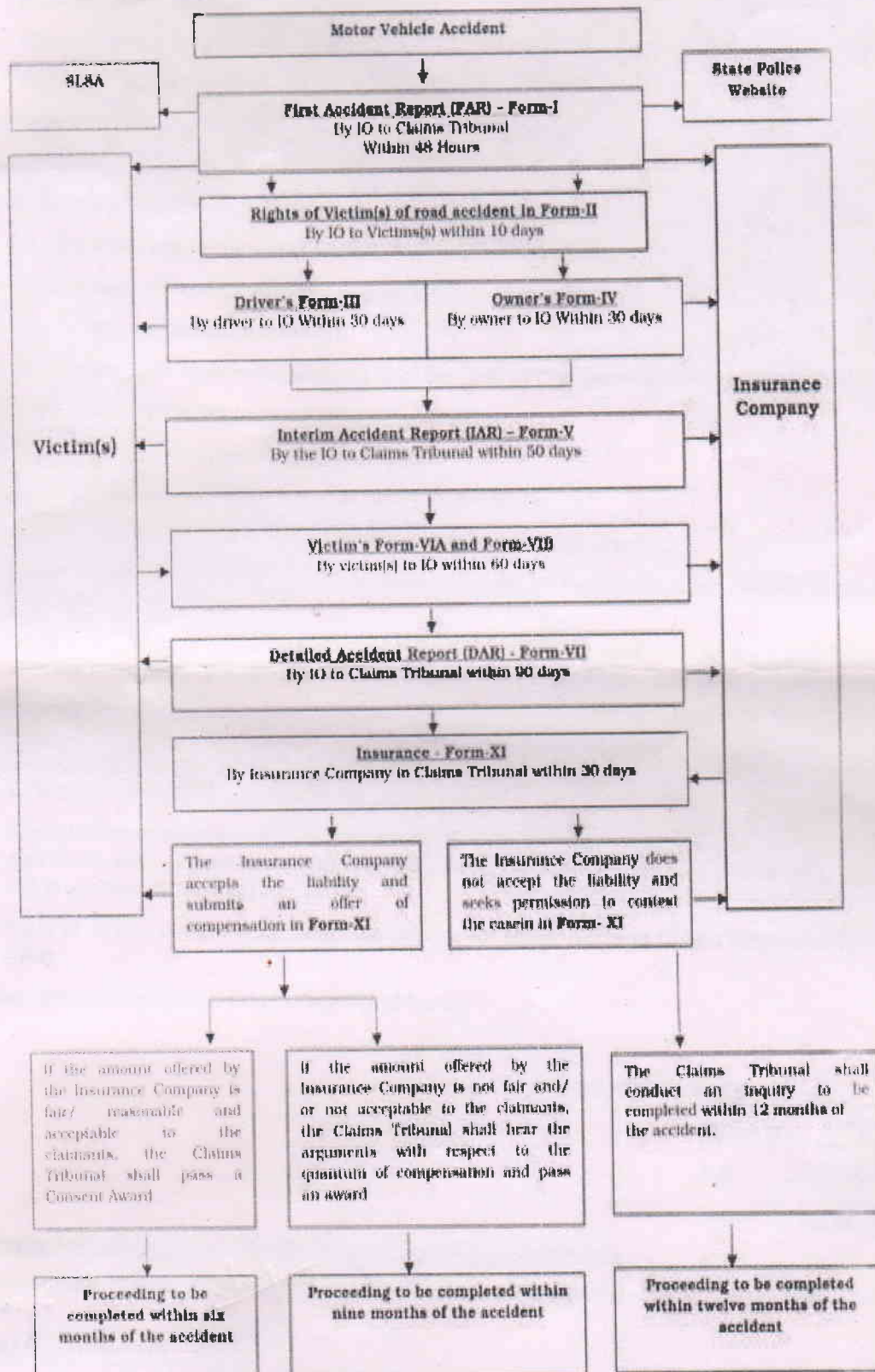
Acknowledgement of the Victim/Family Members/Legal Representatives

I have received this Form and the Flow Chart of the Scheme along with the copy of a blank Victim's Form-VI and Form-VIA.

Ramesh Tamang
Victim/Family Members/Legal Representatives

Date : 16/12/2023

FLOW CHART OF SCHEME FOR MOTOR ACCIDENT CLAIMS



**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.	160/2023
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	Kalimpong

1.	Driver Details	
	Name	Sujal Sarkar (Offending)
	Father's Name	Late Nishi Kanta Sarkar
	Mobile No.	
	Address	Palash Sarani Road, Samar Nagar, ward No.46, PS Pradhan Nagar, Siliguri, Dist Darjeeling.
2.	Age/Date of Birth	11.09.1992
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 checked="" type="checkbox"/> Private Service <input type="checkbox"/> Government Job <input type="checkbox"/> Professional <input type="checkbox"/> Agriculture <input type="checkbox"/> Self-Employed <input type="checkbox"/> Others
6.	Monthly Income	Rs.15000/-
7.	Driving Licence	<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Learner's <input type="checkbox"/> Juvenile <input type="checkbox"/> Without Licence <input type="checkbox"/> Others (Specify)
8.	Driving Licence No.	WB 73 2023 0006763
9.	Period of Validity of Licence	10.03.2043
10.	Licensing Authority	L.A. Siliguri

	Vehicle Registration No.	WB 73D-5355
	Vehicle Type	Mahindra Bolero pick up van
13.	Owner Details	
	Name	Sanjay Kumar Sahani
	Mobile No.	6296498617
	Address	Prakash Nagar, ward No 43, PS Bhaktinagar, Dist, Jalpaiguri.
14.	Insurance Details	
	Policy No.	201330030122700263800000
	Period of Policy	28.03.2024 (Midnight)
	Name of Insurance Company	Liberty General Insurance Limited
15.	Other details	
i.	Nationality of Driver	Indian <input checked="" type="checkbox"/> Foreigner
ii.	Occupation of Driver	Advocate Business Clerk Doctor Driver <input checked="" type="checkbox"/> Engineer Farmer House Keeper Labourer Police Officer Politician Retired Officer Student Unemployed Vendor/ Small Business Owner Worker Other
iii.	Injury Type	Back Injury Buttocks Injury Chest Injury Face Hand Head Hip Knee

		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 Formare 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

Submitted

09.01.2024

(Asi Sa mir Lepcha
Melli OP
PS Kalimpong

 **UNION OF INDIA Driving Licence**

WB73 2023 0006763

Date of Issue 30-03-2023 Validity 10-03-2043

Date of Birth 11-08-1982 Blood Group B+

Name
Sujal sarkar

Guardian's Name
Nishi kanta Sarkar



WB73 2023 0006763

 **L.V.V.**
30-03-2023

Mobile No.
*****1132

Endorsement Date
30-03-2023

Endorsement No.
WB73 /PDL/0006763/2023

Present Address
Pobak Baral Road, Barner Nagar,
Kolkata (71) Darjeeling West Bn. 713003

Sujal Sarkar
Holder's Signature


Issuing Authority
L.A. DELHARI

Form 7 B Use 16/22



CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.

Policy Servicing office : H no.:3004, Grand Plaza,3rd floor, Frezer Road, Dak Bungalow Chouraha, BIHAR, PATNA, BIHAR-800001 PH: +91 612 2216160

Geographical Area	India	From:	06:00 PM of 29/03/2023	
Insured	SANJAY KUMAR SAHANI	To:	Midnight of 28/03/2024	
Address	S/O RAM PRATAP SAHANI AT-PRAKASH NAGAR (SAHANI BASTI) SEVOK ROAD ...WEST BENGAL,DARJILING,SEVOKE ROAD-734001	Policy Issued on	28/03/2023	
Contact Number	7866946367	Covernote No	201330030122700263800000	
Customer GSTIN		Covernote Date	28/03/2023	
UIN CODES:	IRDANI50RP0033V01201213	RTO Location	SILIGURI	Zone: Zone C
		POSP Name		
		Aadhar Number		
		PAN Number		
Agent Name	PROBUS INSURANCE BROKER LIMITED			
Agent Code	IMD1244789	Agent Contact No	9836128113	

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION											
Registration Mark & No.	Year of Manufacture/ Date of Registration/ Invoice Date	Engine No.	Chassis No.	Trailer Registration No	Trailer Chassis No.	Make/Model/ Type of Vehicle	Type of Body	Vehicle Sub Class	CC/HP/ GVW/K W	Public/ Private Carrier	Licensed Carrying capacity including Driver
WB-73-D-5355	2013/17-04-2015/17-04-2015	GHF1B19053	MA1ZNZGHE FIB26946			MAHINDRA/BOLERO PICK UP 4WD PS	OPEN	Goods Carrying (Other than 3-wh. Public Carriers)	2960	Public	2

IDV (INSURED DECLARED VALUE)							
IPV Of Vehicle	Chassis IDV	Body IDV	Non Electrical Accessories	Electrical & Electronics Accessories	Bi-Fuel kit(CNG/LPG)	Trailer	Total Value
330,000.00	330,000.00	0.00	0	0	0	0	330,000.00

Section I - OWN DAMAGE (A)		0	0	330,000.00
Own Damage Premium on Vehicle and accessories		Section II - LIABILITY (B)		
Basic Cover		Third Party Premium		
Basic OD		Basic Cover		
EXTENSIONS UNDER OWN DAMAGE SECTIONS		Basic TP		
Cover for Lamps (Lamp Glass and Burner) (A1.25)	1,195.92	EXTENSIONS UNDER THIRD PARTY SECTION		
Cover for Bumper (Bumper and Guard) (A1.25)	179.30	Legal Liability		
LOADING UNDER OWN DAMAGE SECTION		Legal liability to driver (A1.1) and/or Conductor (A1.1)		
TOTAL OWN-DAMAGE PREMIUM (A)		TOTAL LIABILITY PREMIUM (B)		
TOTAL OWN-DAMAGE PREMIUM + ADD-ON COVER PREMIUM (A+C)	1,375.31	Section III - PA OWNER DRIVER (D)		
TOTAL OWN-DAMAGE PREMIUM + ADD-ON COVER PREMIUM (A+C)	1375.31	Net Premium (A+B+C) Taxable Value		
		IGST (WEST BENGAL)		
		TOTAL POLICY PREMIUM		

LIMITATIONS AS TO USE - The Policy covers use only for carriage of goods within the meaning of the Motor Vehicles Act

The Policy does not cover 1) Use for Organized racing, Pace Making, Reliability Trial, Speed Testing 2) Hazardous driving or reckless driving on public roads 3) Motor racing or driving on a race track 4) Driving while intoxicated 5) Use of the vehicle for illegal purposes 6) Use of the vehicle for hire or reward 7) Use of the vehicle for commercial purposes 8) Use of the vehicle for illegal purposes 9) Use of the vehicle for illegal purposes 10) Use of the vehicle for illegal purposes

DRIVERS CLAUSE

Persons or Classes of Person entitled to drive: Any person including the insured: Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective learner's license may also drive the vehicle when not used for transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

Deductible	Compulsory Deductible: RS 500	Under Section 23(1)(a)
------------	-------------------------------	------------------------

Under Section-I	Voluntary Deductible: Rs 0.00	Under section II-I(ii) of the policy (Death of or bodily injury):	Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988.	Under Section II-I(ii) of the policy (Damage to third party property)	7,50,000	P.A. cover for owner-Driver under section-III, C.R.	NA
Subject to I.M.T. Enforcement Nos.							

Name of the Nominee	Relationship with Insured	Name of Appointee (If nominee is minor)	Relationship with the Nominee
NA	NA	NA	NA

We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of chapter X and chapter XI of M.V. Act 1988.

Receipt No: CR202126104913
Invoice No: 202104913

In case of claim, Please contact us at : Toll Free No.-1800766944

Email id - care@libertyinsurance.in IRDA Registration No. 150
Insurance is the subject matter of solicitation; CIN No. U66000MH2010BP029856

Insurance is the subject matter of solicitation; CIN No. U66000MH2010PLC209656
Date of Issue :28/03/2023

Place: PATNA

Consolidated Stamp duty has been paid as per letter of Authorization no. LOA/CSD/591/2023/473/23
Dated 03/12/2023 issued by Main Stamp Office, Mumbai. ** Not Applicable for the State of Maharashtra.

GI Branch GSTIN :10AABCL9950A1Z0

AC Code:997134 Description of Service:General Insurance Service
Place of Supply : WEST BENGAL

Place of Supply : WEST BENGAL
Tax is not payable under reverse charge by the recipient.

Tax is not payable under reverse charge by the recipient.

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

IMPORTANT NOTICE

IMPORTANT NOTICE
The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation English version will prevail.
Streak in insurance





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.	160/2023
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	Kalimpong

1.	Vehicle Details	
	Registration No.	WB 73D-5355
	Colour	White
	Make	Mahindra & Mahindra Limited
	Model	Mahindra Bolero 2WD Pick up
	Year of Manufacture	04/2015
	Chassis No.	MA1ZNGHKF1826946
	Engine No.	GHF 1B19053
	Registering Authority Name	Registration Authority Kalimpong
	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) <i>Pick up</i>
	Vehicle Use Type	Private Vehicle Commercial Vehicle Goods & Carriage <input checked="" type="checkbox"/> Garbage Truck Taxi/Hired Vehicle

		Public Service Vehicle Educational Institute Bus Others (Specify)
2.	Owner Details	
	Name <i>In case of a company, give name of person in-charge in terms of section 199 of the Motor Vehicles Act, 1988</i>	Sanjay Kumar Sahani
	Father's Name	Ram Pratap Sahani
	Mobile No.	6296498617
	Address	Prakash Nagar, ward No 43, PS Bhaktinagar, Dist, Jalpaiguri.
	Occupation	Business
3.	Driver Details	
	Name	Sujal Sarkar (Offending)
	Father's Name	Late Nishi Kanta Sarkar
	Mobile No.	
	Address	Palash Sarani Road, Samar Nagar, ward No.46, PS Pradhan Nagar, Siliguri, Dist Darjeeling.
	Driving Licence No.	WB 73 2023 0006763
	Period of Validity	10.03.2043
	Licensing Authority	L.A. Siliguri
4.	Insurance Details	
	Policy No.	201330030122700263800000
	Period of Policy	28.03.2024 (Midnight)
	Name of Insurance Company	Liberty General Insurance Limited
	Address of Insurance Company	Policy issuing office: 10 th Floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai, Maharashtra-400013. Policy serving office: H no: 3004, Grand Plaza, 3 rd Floor, Frezer Road, Dak Bungalow Chouraha, Patna, Bihar-800001.
	Details of previous Insurance Policy	


	Whether the vehicle previously involved in any MACT case? <i>If yes, give details of FIR and MACT case.</i>	
5.	In case of commercial vehicle	
	Permit details	
	Fitness details	Fitness upto 23.02.2024 (as per R/C)
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	Regn Valid upto 23.02.2024.
iii.	Vehicle Description	Transport Vehicle Non-transport Vehicle
iv.	Pollution under Control Certificate Validity	14.12.2023.
v.	Tax Details	16.04.2024.
vi.	Seat Capacity	02
vii.	Insurance Company	

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

Submitted

09.01.2024
(B. Samir Lopa)
Melli O P
PS Kalimpang



GOVERNMENT OF WEST BENGAL
State Transport Department KALIMPONG RTO
FORM 23
CERTIFICATE OF REGISTRATION



Registration No	: WB73D5355	Registration Date	: 17-4-2022
Description of Vehicle	: GOODS CARRIER	Purpose For Printing RC	: CHARTER
Dealer's Name & Address	: SONA WHEELS PVT LTD., NA, SILIGURI, . . .		
Owner Name	: SANJAY KUMAR SAHANI	Son/wife/daughter of	: SANJAY KUMAR SAHANI
Full Address: (Permanent)	: PRAKASH NAGAR, SILIGURI, BHAKTINAGAR, JALPAIGURI WEST BENGAL-734008		
Full Address: (Temporary)	: C/O SURESH SINGH, RELI ROAD, NEAR MANI GARAGE KALIMPONG KALIMPONG- WEST BENGAL-734301		
Fitness UpTo	: 23-Feb-2024	Tax UpTo	: 15-4-2022
Owner Serial No	: 3		
Detailed Description			
Class of Vehicle	: GOODS CARRIER	Link Vehicle No	:
Ownership	: INDIVIDUAL	Norms	: BHARAT STAGE III
Maker's Name	: MAHINDRA & MAHINDRA LIMITED		
Front HSRP No	:	Rear HSRP No	:
Type of Body	: TRUCK (FULL BODY)	Month/Year of Manuf.	: 04/2015
No of Cylinders	: 4	Chassis No	: MA1ZN2GK1B26946
Engine No	: GHF1B19053	Fuel	: DIESEL
Horse Power(BHP)	:	Cubic Capacity	: 2523.00
Maker's Classification	: MAHINDRA BOLERO 2WD PICK UP	Wheel base	: 3150
Seating Cap(in all)	: 2	Standing Cap	:
Sleeper Cap	:	Unladen Wt (kgs)	: 1710
Colour	: WHITE	Laden/GV Wt (kgs)	: 2960
Other Criteria	:	AC Fitted	: NO
Vehicle Purchase As	: Fully Built		

Additional Particulars of all transport vehicles other than motor cabs (Gross Vehicle Weight)

By Manuf.	Description	As Regd.	Weight(in kgs)
a) Front:	7R15=2		1040
b) Rear:	7R15=2		1920
c) Other:	NA		0
d) Tandem:	NA		0

The motor vehicle above described is subject to Hypothecation in favour of w.e.f. .

Purchase dt	: 13-Apr-2015	Sale Amt	: 685043/-
OTT Date	: 17-Apr-2022	Amount/Rcpt No	: 700 / WB220420C7541152
TaxUpTo	: 16-Apr-2023	Vehicle is Govt./ Pvt.	: PRIVATE
Tax Exempted or Not	: NOT EXEMPTED	Date of Approval	: 11-May-2022

Other State/Transfer/Conversion Details

Previous Owner	:	Previous RegNo	:
Old State	:	Entry Date	:
Transfer Date	:	Conversion Date	:

This certificate is valid from 17-Apr-2015 to 23-Feb-2024

Date : 11-May-2022 15:38:55

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority
Kalimpong
11-May-2022

Safe Drive Save Life
No Rough Drive

 **UNION OF INDIA Driving Licence**

WB73 2023 0006763

Date of Issue **30-03-2023** Validity **10-03-2043**




Date of Birth **11-09-1992** Blood Group **B+**



Name
Sujal sarkar

Guardian's Name
Nishi kanta Sarkar

WB73 2023 0006763



LAV
30-03-2023

Mobile No.
*******1132**

Endorsement Date
30-03-2023

Endorsement No.
WB73 /PDL/0006763/2023

Present Address
**Palash Sarani Road, Sarani Nagar,
Kolkata (CT) Darjeeling West Bn. 734003**


Sujal Sarkar
Holder's Signature

Issuing Authority
L.A. SILIGURI

Form 7 Rule 16(2)



IMPORTANT 1) The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque.
2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.
3) In the event of misrepresentation, fraud or non-disclosure of material facts, the company reserves the right to cancel the policy from inception.

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION

IDV (INSURED DECLARED VALUE)

330,000.00	330,000.00	0.00	0	Section II - LIABILITY (B)	
Section I - OWN DAMAGE (A)				Third Party Premium	
Own Damage Premium on Vehicle and accessories				Basic Cover	
Basic Cover				1,196.92	
Basic OD				18,317.50	
EXTENSIONS UNDER OWN DAMAGE SECTIONS				EXTENSIONS UNDER THIRD PARTY SECTION	
Cover on Lamps (Vehicles manufactured after 1-1-20)				Legal Liability	
179.30				Legal liability to driver(s)/Conductor(s)	
LOADING UNDER OWN DAMAGE SECTION				100.00	
TOTAL OWN-DAMAGE PREMIUM (A)				16,145.00	
TOTAL OWN-DAMAGE PREMIUM + ADD-ON COVER PREMIUM (A+C)				TOTAL LIABILITY PREMIUM	
1375.31				Section III - PA OWNER DRIVER (D)	
				Net Premium (A+B+C) Taxable Value	
				2191.38	
				IGST (WEST BENGAL)	
				19,715.00	
				TOTAL POLICY PREMIUM	

Hire Purchase/Lease/Hypothecated with : MAHINDRA AND MAHINDRA FINANCIAL SERVICES LTD.

LIMITATIONS AS TO USE -The Policy covers use only for carriage of goods within the meaning of the Motor Vehicles Act

LIMITATIONS AS TO USE-The Policy covers use only for carriage of goods within the meaning of the Motor Vehicles Act
 The Policy does not cover 1) Use for Organized racing, Pace Making, Reliability Trial, Speed Testing 2) Use while drawing a trailer except the towing (other than for reward) of any one disabled Mechanically
 insured or tugboat, school employees (other than driver) not exceeding the no. permitted in registration document and coming under purview of Workmen's Comp Act 1923.

DRIVERS CLAUSE

DRIVERS CLAUSE
Persons or Classes of Person entitled to drive: Any person including the insured: Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective learner's license may also drive the vehicle when not used for transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

Limits of Liability						
Deductible Under	Compulsory Deductible: R5 500 Voluntary Deductible: R5 000	Under Section II-I(i) of the policy (Death of or bodily injury):	Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988.	Under Section II-I(ii) of the policy (Damage to third party property)	7,50,000	P.A. cover for owner-driver under section-III: C&I

Section-I

Subject to I.M.T Endorsement Nos.

IMT 7, IMT 28, IMT 23, IMT 21

Such amount as is necessary to meet there requirements of the Motor Vehicles Act, 1965.

Under Section 11-1(ii) of the policy (Damage to third party property)

7,50,000	P.A. cover for owner-Driver under section-104, 105	NA
----------	--	----

NOMINATION DETAILS

NOMINATION DETAILS		Name of Appointee (if nominee is minor)	Relationship with the Nominee
Name of the Nominee	Relationship with Insured	NA	NA

I/We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of chapter X and chapter XI of M.V. Act 1988.

In witness whereof this Policy has been signed at Mumbai on 28/03/2023

Receipt No: CR202126104923

Invoice No:

In case of claim, Please contact us at : Toll Free No -18002665844,
City Contact Number in IPDA Registration No. 150

Email id – care@libertyinsurance.in IRDA Registration No. 150
Insurance is the subject matter of solicitation; CIN No. U66000M

Insurance is the subject matter of solicitation; CIN No. 066000MH2010FLC207653
Date of Issue :28/03/2023

Date of Issue : 28/03/2023
Place: PATNA

Consolidated Stamp duty has been paid as per letter of Authorization no. LOA/CSD/591/2023/4/3/22
Dated 03/02/2023 issued by Main Stamp Office, Mumbai. ** Not Applicable for the State of Jammu

Dated 03/02
& Kashmir.

LGI Branch GSTIN :10AABCL9950A1Z0

SAC Code: 997134 Description of Service: General Insurance Service
Place of Supply : WEST BENGAL

Place of Supply : WEST BENGAL.

Tax is not payable under reverse charge by the recipient.

IMPORTANT NOTICE

IMPORTANT NOTICE

IMPORTANT NOTICE

The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation English version will be good.

Break in insurance.

For Liberty General Insurance Limited

Authorized Signatory

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 SLISA

FIR No.	160/2023
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	Kalimpong

1.	Date of Accident	11.12.2023
2.	Time of Accident	17.30 hrs.
3.	Place of Accident	Antari jhora. NH-10. near Melli Bazar
4.	Offending Vehicle	
	Registration No.	WB 73D-5355
	Vehicle Make	Mahindra & Mahindra Limited
	Vehicle Model	Mahindra Bolero 2WD Pick Up
5.	Driver of the offending vehicle	
	Name	Sujal Sarkar
	Father's Name	Late Nishi Kanta Sarkar
	Mobile No.	
	Address	Palash Sarani Road, Samar Nagar. Ward No- 46 PS Pradhan Nagar, Siliguri, Dist. Darjeeling.
	Driving Licence	Permanent Learner's Juvenile Without License Others (Specify)
	Driving Licence No.	WB 73 2023 0006763
	Validity of Licence	10.03.2043
	Licensing Authority	L.A. Siliguri
6.	Owner of the offending vehicle	
	Name	Sanjay Kumar Sahani
	Father's Name	Ram Pratap Sahani
	Mobile No.	6296498617
	Address	Prakash Nagar. Ward No-43. PS Bhaktinagar, Dist. Jalpaiguri
7.	In case of commercial vehicle	
	Permit details	
	Fitness details	23-Feb-2024
8.	Insurance Details	

	Policy No	201330030122700263800000		
	Period of Policy	28.03.2024 (Midnight)		
	Name of Insurance Company	Liberty General Insurance Limited		
	Address of the Insurance Company	Policy issuing office: 10 th Floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai, Maharashtra- 400013. Policy serving office: H no: 3004, Grand Plaza, 3 rd Floor, Frezer Road, Dak Bungalow Chouraha, Patna, Bihar-800001.		
9.	Witness(es) to the accident			
	Witness-1: Name	CV-289 Vivek Subba		
	Mobile No.	8167402698		
	Address	Melli O.P. PS Kalimpong		
	Witness-2: Name	S.I. Deepak Thapa		
	Mobile No.	9932843791		
	Address	O.C. Control Room, Kalimpong		
	Witness-3: Name	Ramesh Tamang		
	Mobile No.	9733291360-9475968044		
	Address	Chhota Samdong, Tamthok, Arubotay, near L.P.S. School, Majuwa, PS Naya Bazar, Dist Soreng, Sikkim- 737121.		
	Witness-4: Name	Sabina Limbu		
	Mobile No.			
	Address	Chisopani, Ambotey, PS Jorethang, Dist Namchi, Sikkim.		
10.	Brief description of the Accident-			
11.	Details of compliance(s)			
i.	Date of filing of First Accident Report (FAR)	13.12.2023		
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)	16.12.2023		
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 <input checked="" type="checkbox"/> Police Officer Politician Retired Officer <input checked="" type="checkbox"/> Student Unemployed Vendor/ Small Business Owner Worker Other
iii.	Severity	Fatal
		<input checked="" type="checkbox"/> Grievous Injury Simple Injury Hospitalized Simple Injury Non Hospitalized No Injury
iv.	Injury Type	Back Injury Buttocks Injury Chest Injury Face Hand <input checked="" type="checkbox"/> Head Hip Knee <input checked="" type="checkbox"/> Leg Neck Not Applicable Shoulders Injury Abdominal
v.	Mode of Hospitalization	108 Ambulance Not Hospitalized By Self <input checked="" type="checkbox"/> Private Ambulance Private Vehicle

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

S.H

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

Phone No. : 993237025

P.S. : Kalumpung

Date : 31.01.2024

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 A

VICTIM'S FORM RELATING TO MINOR CHILDREN OF VICTIM(S)

By Victim(s) to Investigating Officer within sixty (60) days of
Accident Copy to Child Welfare Committee and SLSA

FIR No.	KPH PS Case No 160/23
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	Kalumpang

Details of the Minor Children (18 years or below)

S. No.	Details of Children	Child 1	Child 2	Child 3	Child 4
1.	Name				
2.	Age/Date of Birth				
3.	Sex				
4.	SC/ST/OBC/ General				
5.	Father's Name				
6.	Mother's Name				
7.	Guardian's Name (If different from parent)				
8.	Family Income (Annual)				
9.	Permanent Address				
10.	Present Address				
11.	Contact No. of father/ mother / family member				
12.	Whether the child is differently abled: If yes, give details				
13.	Present living conditions, economic condition (after the accident)				

Educational details of children

14.	Current status of education				
	Level of education (class)				
	Whether the child is enrolled under EWS quota				
15.	If not attending school, reasons to be provided				
16.	Detailed information of the school where the child is studying				
	Corporation/ Municipal/ Panchayat				
	Govt./Other Boards				

	Private Management				
17.	Expenditure on education				
	Monthly school tuition fee				
	Annual school fee				
	Private tuition / coaching fee				
	Any other expenditure / logistics fee				
18.	Vocational training / skill development, if any				
	Type of skill development				
	Cost involved				
Health and Nutrition					
19.	Physical health condition of the child (including medical examination report, in case of any disability)				
	Any injury to child. If yes, details to be given				
	Loss of any body part due to accident				
20.	Mental health condition of the child				
	Whether immediate psychological counseling treatment/ support required				
	Whether long term support required				
21.	Medical expenses, if any				
	Cost involved in immediate medical treatment				
	Cost involved in long term medical treatment				
22.	Diet and nutrition expenses				

Documents to be submitted:

1. Copy of school/educational institution ID,
2. Copy of Aadhar card
3. Proof of education fee
4. Proof of other expenses/expenditure of the children
5. Copy of medical documents
6. Disability Certificate, if applicable
7. Copy of Caste certificate, if applicable
8. Copy of Income certificate, if applicable

Verification:

Verified at Atoli on this 29th day of Dec 2024 that the contents of the above Form are true to my knowledge and the documents attached are true copies of the originals

Shy Ramesh T
Victim(s)

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.	KALIMPONG PS CASE NO 160/2023
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	KALIMPONG

1.	Date of Accident	11.12.2023
2.	Time of Accident	17.30 HRS
3.	Place of Accident	ANTARI JHORA, NH-10, NEAR MELLI BAZAR
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	WB 73D- 5355
6.	Owner Details	
	Name	SANJAY KUMAR SAHANI
	Address	PRAKASH NAGAR, WARD NO 43, PS BHAKTINAGAR DIST. JALPAIGURI.
7.	Driver Details	
	Name	SUJAL SARKAR
	Address	PALASH SARANI ROAD, SAMARNAGAR WARD NO 46, PS PRADHANNAGAR, SILIGURI, DIST. DARJEELING
8.	Insurance Details	
	Policy No.	201330030122700263800000
	Period of Policy	28.03.2024 (MIDNIGHT)
	Name of Insurance Company	LIBERTY GENERAL INSURANCE LIMITED

DEATH CASE

9.	Name of the deceased	
10.	Father's Name	
11.	Age / Date of Birth	
12.	Date of death	
13.	Gender of the deceased	
14.	Marital status of the deceased	
15.	Occupation of the deceased	
16.	If the deceased was employed, give the name and address of the employer	
17.	Income of the deceased	

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				
21.	Whether the victim got reimbursement of medical expenses from his employer or under a Mediclaim policy or under any government cashless treatment scheme or government insurance scheme <i>If yes, provide details</i>				
22.	Name, Age, Gender, Relation and Marital Status of Legal Representatives of the deceased				
	Name	Age / Date of Birth	Gender	Relation	Marital Status
i.					
ii.					
iii.					
iv.					
v.					
vi.					
23.	Name, Contact Number and Address of Legal Representatives of the deceased				
	Name	Contact Number	Present Address as well as Permanent Address		
i.					
ii.					
iii.					
iv.					
v.					
vi.					
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.					
ii.					
iii.					
iv.					
v.					
vi.					

INJURY CASE

25.	Name of the Injured	(1) Ramesh Tamang & (2) Sabina Limbu		
26.	Father's Name	(1) Dhan Bahadur Tamang & (2) Bir Singh Limbu		
27.	Address of the Injured	(1) Chhota Samdong, Tamthok, Arubotay, near L.P.S. School, Majuwa, PS Naya Bazar, Dist, Soreng, Sikkim-737121. (2) Chisopani, Ambotay, PS Jorethang, Dist. Namchi, Sikkim.		
28.	Contact No. of Injured	(1) 9733291360 & 9475968044		
29.	Age / Date of Birth	(1) 09/08/1988 & (2) 31/03/2004		
30.	Gender of the Injured	(1) Male & (2) Female		
31.	Marital status of the Injured	(1) Married & (2) Unmarried		
32.	Occupation of the Injured	(1) Govt. Employed & (2) Student		
33.	If the Injured was employed, give the name and address of the employer	(1) Const-No 150369 Ramesh Tamang of 2 nd IRB, Sikkim Police, HQ, Pipalay, West Sikkim.		
34.	Income of the Injured	(1) 4,74,912/- Per annum		
35.	Whether Injured assessed to Income Tax <i>If yes, file the copy of Income Tax Returns for the last three years</i>	No		
36.	Nature and description of Injury	(1) Simple & (2) Grievous. Multiple fractures		
37.	Medical treatment taken by the Injured			
38.	Name of hospital and period of hospitalization Hospital Name Period of Hospitalization Doctor's Name	Central Referral Hospital, Sikkim Manipal University. 11.12.2023 2135 hrs.to Dr. Lal Selvaraj Roy		
39.	Details of surgery(s), if undergone			
40.	Whether any permanent disability <i>If yes, give details</i>	No		
41.	Details of the family of the Injured			
	Name	Age / Date of Birth	Gender	Relation
i.	Dhan Bahadur Tamang		Male	Father of Ramesh Tamang
ii.	Bir Singh Limbu	52yrs	Male	Father of Sabina Limbu
iii.	Pavitra Limbu		Female	Mother of Sabina Limbu
iv.				
v.				
vi.				
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.			
ii.			
iii.			
iv.			
v.			
vi.			
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 Mediclaim policy or under any government cashless treatment scheme or government insurance scheme <i>If yes, provide details</i>		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	Central Referral Hospital, Sikkim Manipal University.	
iii.	State	Sikkim	
iv.	District	Gangtok, East Sikkim	
v.	Address	5 th Mile, Tadong, Gangtok	
vi.	Pincode	737102	
vii.	Hospital Type	Private	

x.	Mobile	
xi.	National Identification Number (NIN)	
xii.	Landline	
xiii.	E-Mail	
xiv.	Username	
xv.	Password	
xvi.	Retype Password	
xvii.	Hospital Location	
xviii.	Police District	
xix.	Police Station	
50.	Patient's details	
i.	Patient Type	Out Patient(MLD-OP) In Patient(MLD-IP)
ii.	In Patient/Out Patient	
iii.	Time of Arrival	21.30 hrs & 22.00 hrs.
iv.	Patient Name	(1) Sabina Limbu & (2) Ramesh Tamang
v.	Patient Age	(1) 19yrs, & (2) 36yrs.
vi.	Patient Contact Number	(1) 8159810627 & (2) 9733291360 / 9475968044
vii.	Gender	Male Female
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	(1) Bir Singh Limbu & (2) Dhan Bahadur Tamang
xii.	Patient Address	(1) Chisopani, Ambotay, PS Jorethang, Dist. Namchi, Sikkim (2) Chhota Samdong, Tamthok, Arubotay, near L.P.S. School, Majuwa, PS Naya Bazar, Dist. Soreng, Sikkim-737121.
xiii.	Accident Register Number	
xiv.	ID Proof	Voter ID PAN Card Aadhaar Card Driving Licence Others ID Proof Unavailable

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

		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	
xi.	National Identification Number (NIN)	
xii.	Landline	
xiii.	E-Mail	
xiv.	Username	
xv.	Password	
xvi.	Retype Password	
xvii.	Hospital Location	
xviii.	Police District	
xix.	Police Station	
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	
iv.	Patient Name	
v.	Patient Age	
vi.	Patient Contact Number	
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/expenditure 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 Mediclaim 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
9. Any other

document Other



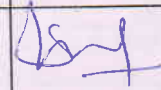

documents to be

submitted

1. X Ray
2. CT Scan
3. ECG
4. Other documents

Verification:

Verified at Mellis on this 29th day of Dec 2023 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.	Ramendra Tamang		
2.	Sabina Limbu		
3.			
4.			
5.			
6.			



SEIZURE LIST

PR No 247/23

REF: Kalimpong P.S. case No 160/23 dt 12/12/2023 u/s 279/337/338 IPC.

1. DATE & TIME OF SEIZURE : On 12.12.2023 in between 17:45 hrs to 17:55 hrs.
2. PLACE OF SEIZURE : Melli OP Compound
3. FROM WHOM SEIZED : As shown by SI Deepak Thapa D/C Melli O.P. under P.S. Kalimpong
4. NAME OF WITNESS
 - (I) SI Alamgir Samkar.
of Melli OP
under P.S. Kalimpong
 - (II) SI Jonathan Lepcha
of Melli OP
under P.S. Kalimpong

5. DESCRIPTION OF SEIZED ARTICLES :

- SI Deepak Thapa
- (1) One white colour Balerio Pick up Vehicle bearing Regd. No WB 73 D 5355 with Key, right side body slightly damaged condition.
 - (2) One dark blue colour Ativa 125 Scooty bearing Regd. No SK DIP 2801 with Key right side body slightly damaged condition.

Seized as Stolen

both the seized Balerio Pick up and Ativa 125 Scooty was brought at Melli O.P.'s Compound as safe custody under Melli O.P. GDE No 241 dt 11.12.2023.

6. SIGNATURE OF WITNESS

(I) SI Alamgir Samkar

(II) SI Jonathan Lepcha



DA No 1036/2023

DT 13/12/2023

12.12.2023
(SI Jonathan Lepcha)
Melli O.P.
P.S. Kalimpong

SEIZED BY ME



SEIZURE LIST

PR NO 250/2023

REF: Kalimpong PS Case NO 160/2023 dtd 12.12.2023 u/s
279/337/338 IPC.

1. DATE & TIME OF SEIZURE : on 14.12.2023 in between
15.45 hrs to 15.55 hrs.
2. PLACE OF SEIZURE : At Meli and Post
3. FROM WHOM SEIZED : As produced by owner of vehicle
Sri Sanjay Kumar Sahani S/O
Ravi Pratap Sahani of Bhaktar
Nagar, PS Bhaktinagar S.M.C.
Dist Jalpaiguri
4. NAME OF WITNESS
(I) SI Jonathon Lepcha
of Meli O.P.
PS Kalimpong
(II) LCVF-965 Yaminna Bishwakarma
of Meli O.P.
PS Kalimpong

5. DESCRIPTION OF SEIZED ARTICLES :

1. One photocopy of certificate of Registration having
Registration NO WB 73D 5355 registration date 12/04/15
in S/O Sanjay K. Sahani S/O Ravi Pratap Sahani of
Bhaktar Nagar, PS Bhaktinagar S.M.C Dist Jalpaiguri
Class of Vehicle - Goods Carrier, Maker's name Mahindra &
Mahindra Ltd. Maker's classification Mahindra Bolero 2WD
Pick up Engine NO - GHF 1819053, Chassis NO - MA12N2
GHKF1B26946

2. One certificate of Insurance cum Policy schedule having Policy No
201330030122700263800000, Period of insurance from 00.00hrs 29/03/2023
to midnight of 28/03/2024 in respect of Sanjay Kumar Sahani, insured motor
vehicle bearing Regt. NO WB 73D-5355 owned by Liberty General Insurance Ltd.
Policy Number 2770011015 floor, Tower A, Tannurvia Business Park
Gandhinagar Kalamnagar, Lower Parel, Mumbai, Maharashtra - 400013

6. SIGNATURE OF WITNESS

(I) SI Jonathon Lepcha

3. One authorisation letter

4. One Driving License having D/L NO WB 73 2023
0006763 in respect of Sanjay Kumar S/O Nishi
Kant Sarkar issued by Licensing Authority,
Sahani on 12.03.2023 validity 10.03.2043

(II) LCVF
965

Yaminna Bishwakarma



DR NO 1039
dt 15.12.2023

(SI Samir Lepcha)
Melli O.P. PS Kalimpong
SEIZED BY ME

GOVERNMENT OF WEST BENGAL

State Transport Department
[KALIMPONG RTO]

VEHICLE PARTICULARS (FOR INTERNAL USE)

Application No: WB23121549633605
 Owner Name: SANJAY KUMAR SAHANI
 Vehicle Class: Goods Carrier
 Registration No: WB73D5355
 Son/Wife/Daughter of: RAM PRATAP SAHANI
 Vehicle Maker: MAHINDRA & MAHINDRA LIMITED
 Month/Year of Manuf.: 4/2015
 Speed Governor No: 180220748
 Speed Governor Manuf.: GRL ENGINEERS SGGE
 Ownership Type: INDIVIDUAL
 Present Address: C/O SURESH SINGH, RELLI ROAD, NEAR MANI GARAGE, KALIMPONG, Kalimpong, West Bengal-734301
 Speed Governor Fitted On: 02-APR-2018
 Chassis No: MA1ZN2GHKF1B26946
 Engine No: GHF1B19053
 Color: WHITE
 Vehicle Status: ACTIVE
 Owner Serial No: 3
 Body Type: TRUCK (FULL BODY)
 Horse Power(BHP): 2960
 Seat(Inc. driver): 2
 No of Cylinders: 4
 Laden Wt(kg): 2960
 Tax Amount: 700
 Unladen Wt(kg): 1710
 Vehicle Model: MAHINDRA BOLERO
 Wheel Base: 3150
 Cubic Capacity: 2523.00
 Floor Area: 2523.00
 Registration Date: 17-Apr-2015
 Regn Valid upto: 23-Feb-2024
 Tax Paid upto: 16-Apr-2024
 Fuel: DIESEL
 Fitness upto: 23-Feb-2024
 Vehicle Norms: BHARAT STAGE III
 Last Change of Address on: Last Alteration of Vehicle on
 THIRD PARTY Insurance From Liberty General Insurance Limited vide policy certificate/covernote no 201330030122700263800000 is valid from 29-Mar-2023 to 28-Mar-2024.

HP Dts:

1. Hypothecation-MAH AND MAH FIN SER LTD., SILIGURISILIGURI, Darjeeling-734001

PUC From: 15-Jun-2023
 Mobile No: 8250341250
 PUC Upto: 14-Dec-2023
 Email Id:
 Other State/Transfer/Conversion Details
 Previous Owner :
 Old State :
 Transfer Date :
 Previous RegNo :
 Entry Date :
 Conversion Date :

Additional Particulars

	Number, Desc & size of	Regd. Axle Weight(In kgs)
a) Front:	7R15=2	1040
b) Rear:	7R15=2	1920
c) Other:	NA	0
d) Tandem:	NA	0

Signature of Registering Authority
 KALIMPONG RTO [WEST BENGAL]
 Registering Authority
 Kalimpong

Printed On: 15-Dec-2023 16:01:46

Permanent Add:

Prakash Nagar
 P.S. Bhaktinagar
 Siliguri

M.No: 8250341250

Melli OP DR No - 1041/23
dt 16/12/2023.

To
Shri Sanjib Roy
Mechanical Expert
Pimpasa Jalpaiguri.

Date - 16/12/2023

Ref.: Kalimpang P.S. MA Case No. 160/23 Dt. 12/12/23
u/s 279/337/338 CrP.

Sub: MECHANICAL EXAMINATION OF THE VEHICLE

BEARING NO. - NB-73D-5355 (Pickup Van)
SK-01PC-2801 (2-wheeler)

Sir,

Kindly arrange to mechanical Examination of the seized above noted Vehicle which was seized in c/w in above referred case. This vehicle lying at P.S. compound.

Thanking You

Recd
16/12/2023
SANJIB ROY
Mechanical Examiner
Automobile Engineer
Recd. No. 029700-3

Yours faithfully
Sanjib Roy
16/12/2023
CA Sanjib Roy (Lepcha)
Melli OP
PS Kalimpang

SANJIB ROY
AUTOMOBILE ENGINEER,
MECHANICAL EXPERT

C/o. NIRMALA NALINI
PANPARA, P.S. KOTWALI
DIST. JALPAIGURI
Pin - 735101 (W.B.)

To
The Officer / Inspector In-charge,

Malli OP DR No - 1041/23
dt- 16/12/2023.

.....Kalimpong..... P. S.

Sub : MECHANICAL EXAMINATION REPORT IN CONNECTION WITH P.S.

U/S 279/339/338 IPC.

Case No.160/2023..... Date12/12/2023.....

M.A. Case No. Date

Engine No. : GHF1B19053.

Chassis No. : MA12N26HKF1B26946.

Sir,

I beg to report that as per your requisition, I examine the vehicle No.NR-73/D 5355 (PUNAPUN)
at Malli out Post (Kandi) about 03:30 Pm.

in presence of your duty officer and I also declared that the above report has been submitted on the basis of my own observation and study of the Vehicle and without prejudice of any person / Circumstances. I examined the following mechanical parts of the vehicle and their condition are noted against each.

1. Steering / Handle : OK
2. Brakes : OK
3. Clutch : OK
4. Battery : Not in working condition
5. Lighting System : Not in working condition
6. Tyre : OK
7. Front Show : Driver's Cabin damage
8. Side body : Load body damage
9. Rear body : OK
10. Chassis : Required to be checked after disassembling
11. Body Cell :
12. Other : Working system / All key ray / Front Suspension / Looking glass damage.

Remarks :

from the technical point of view it appears to me that the accident occurred due to other than mechanical failure

Yours faithfully.

16/12/2023
SANJIB ROY
Mechanical Examiner
Automobile Engineer
Regd No. 029700-3

SANJIB ROY

AUTOMOBILE ENGINEER,
MECHANICAL EXPERT

C/o. NIRMALA NALINI

PANPARA, P.S. KOTWALI

DIST. JALPAIGURI

Pin - 735101 (W.B.)

To
The Officer / Inspector In-charge,

Malli DP DR M - 10A1 25 dt 16/12/23

Kallimpong P.S.
Dt Kallimpong

Sub : MECHANICAL EXAMINATION REPORT IN CONNECTION WITH P.S.

U/S 279/337/338 JPC,

Case No. 160/2023 Date 12/12/2023

M.A. Case No. Date

Engine No. : JF49EG4009382,

Chassis No. : ME4JF49MMK4006454.

Sir,

I beg to report that as per your requisition, I examine the vehicle No. SK-DIPS-2801 (2-wheeler)
at Malli Dnt Post (Armed) about 04-00 P.M.

in presence of your duty officer and I also declared that the above report has been submitted on
the basis of my own observation and study of the Vehicle and without prejudice of any person /
Circumstances. I examined the following mechanical parts of the vehicle and their condition are
noted against each.

1. Steering / Handle : Assy damage.
2. Brakes : OK
3. Clutch : OK
4. Battery : OK
5. Lighting System : Damage.
6. Tyre : OK
7. Front Show : Damage.
8. Side body : Damage.
9. Rear body : OK
10. Chassis :
11. Body Cell :
12. Other : OK

Remarks : - From the technical point of view it appears to me that the
accident occurred due to other than mechanical failure.

Yours faithfully.

16/12/2023
SANJIB ROY
Mechanical Examiner,
Automobile Engineer
Regd. No. 029700-3



SEIZURE LIST

PR No 252/2023

REF:- Kalimpang PS Case No 160/2023 dtd 12/12/2023 u/s 279/337/338 I.P.C.

1. DATE & TIME OF SEIZURE : On 16.12.2023 in between 15.45 hrs to 15.55 hrs.
2. PLACE OF SEIZURE : Malli O.P.
3. FROM WHOM SEIZED : On being produced by Rameru Tamang S/O Dharm Bahadur Tamang of Chhota Sandang, Tamthok, Akubaley, near L.P.S. School, Majumdar PS Naya Bazar Dist. Sikkim - 737121.
4. NAME OF WITNESS :
 - (I) Bikram Kumar Subba (39 yrs) S/O Sri Kumbha Lal Limbu of Chisopani, Ambolay PS Toke Thang Dist. Namchi Sikkim (M/NO 9664940728)
 - (II) Kuran Rai (33 yrs) S/O Sri Karmar Bahadur Rai of Chisopani, Ambolay PS Toke Thang Dist. Namchi Sikkim (M/NO 9647785097)

5. DESCRIPTION OF SEIZED ARTICLES :

- (i) One original Certificate of Registration having Regn. No SK01 PC 2801, date of Regn 10-Feb-2020 Regn. Validity 09-Feb-2035 Chassis No ME1JF49MMKG006454, Engine No JF49EGH009382 Owner Name Rameru Tamang S/O Dharm Bahadur Tamang, Vehicle class - M-Cycle/Scooter, Maker's Name Honda Motor Cycle and Scooter India P Ltd, Model Name Active 125-Dlx, Colour Midnight Blue Metal.
- (ii) One original Certificate of Insurance cum Policy Schedule Policy No 2312 2032 5215 6500 000, Period of Insurance from 23 Jan 2020 16:29 hrs to 22 Jan, 2025 Midnight Valid date 23/01/2020 by HDFC ERGO General Insurance Company Ltd. Registered & Corporate office - 1st floor HDFC House, 165/166 Backbay Reclamation, H.T. Park & Marg Churchgate, Mumbai - 400020, Make & Model Honda, Policy No one insured name Rameru Tamang.

6. SIGNATURE OF WITNESS

(I) Bikram K Subba

(II) Kuran Rai

(iii) One original Identity License having D/L NO SK01 00000001012 Date of issue 14-08-2020 Validity 13-08-2030 in the name of Rameru Tamang issued by Licensing Authority RTO Gangtok Sikkim.



12.12.2023
(S) Samir Lepcha
Malli OP
PS Kalimpang
SEIZED BY ME

Transport Department, Govt of Sikkim
Certificate of Registration (Form 23)

SK NT

Regn. No. SK01PC2801 Date of Regn. 10-Feb-2020 Regn. Validity 09-Feb-2035

Chassis No. ME4JF49MMKG008454

Engine No. JF49EG4009382

Owner Name RAMESH TAMANG

Son/Daughter/Wife of DHAN BAHADUR TAMANG

Address 0/0 COMMANDANT, 3RD IRB, PHQ, GANGTOK, EAST DISTRICT-SIKKIM-737121

Tax upto 22-Jan-2022

Fuel Used PETROL

Emission Norms BHARAT STAGE VI

Owner No. 1

HPT

REGIONAL TRANSPORT OFFICER
GANGTOK

SK NT

Vehicle Class M-CYCLE/SCOOTER

Maker's Name HONDA MOTORCYCLE AND SCOOTER INDIA (P) LTD

Model name ACTIVA 125 - DISC

Colour MIDNIGHT BLUE METALL

Body type FULL BODY

Seating (in all) Capacity 2

Regn. No. SK01PC2801

Month & Yr. of Mfg 12/2019

Wheel Base (mm) 1260

Cubic Capacity 124.00

No of Cylinders 1

ULW(kgs) 111

QR Code

Registering Authority
GANGTOK
Transport Department
Vehicles Division
Govt. of Sikkim, Gangtok

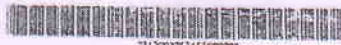
HDFC ERGO General Insurance Company Limited

Certificate of Insurance cum Policy Schedule

Motor Insurance - Two Wheeler Package Policy - 5 Years



Take it easy



2312032262186600000

		Vehicle Details	Policy Details
MR RAMESH TAMANG H NO 96 TAMTHOK ARUBOTEY, VILL - MAZUA TAMTHOK SUB-SORENG DIST WEST SIKKIM WEST SIKKIM WEST SIKKIM SIKKIM - 737121, Tel 8733291360	Make	HONDA	Policy No 2312 2032 6218 6600 000
	Model - Variant	ACTIVA-125 DISC BSVI	Period of Insurance From 23 Jan, 2020 16:29 hrs To 22 Jan, 2025 Midnight
	Registration No	NEW	Issuance Date 23/01/2020
	Engine No.	JF49E G4009382	Invoice No. 2032521566000000
	Chassis No.	ME4JF49MMKG006454	Customer Id 100412458937
	Cubic Capacity/Watts	124 Seats(Incl. of side car) 2	
	Year of Manufacture	2020 Body Type OPEN	
		RTO GANGTOK	
Payment Details: Cheque No. 688977, Date: 23/01/2020, Bank Name: Canara Bank			
Email ID: sikkim.honda@kaysonsfonda.com			

Policy Year	Policy Period	For the Vehicle	Side Car	Non Electrical Acc.	Electrical Acc.	CNG/LPG Kit	Total IDV
Year 1	From 23/01/2020 To 22/01/2021	78374	0	0	0	0	78374
Year 2	From 23/01/2021 To 22/01/2022	65999	0	0	0	0	65999
Year 3	From 23/01/2022 To 22/01/2023	57749	0	0	0	0	57749
Year 4	From 23/01/2023 To 22/01/2024	49499	0	0	0	0	49499
Year 5	From 23/01/2024 To 22/01/2025	41249	0	0	0	0	41249

Own Damage Policy Period		Liability Policy Period	
From Date & Time	To Date & Time	From Date & Time	To Date & Time
23/01/2020 16:29 hrs	22/01/2025 Midnight	23/01/2020 16:29 hrs	22/01/2025 Midnight
Premium Details (₹)		Premium Details (₹)	
Own Damage Premium (a)		Liability Premium (b)	
Basic Own Damage		Basic Third Party Liability	
Total Basic Premium		P.A. Charges for Owner/Driver of 1500000 (Applicable for 1 year)	
Add on Coverages		LL to Paid Driver (IMT-28)	
Zero Depreciation (IRDAN125A99/5V012009110)		Sub Total - Addition	
Total-Add-on		Net Liability Premium (b)	
Net Own Damage Premium (a)		Total Package Premium (a+b)	
5443		Integrated Tax 18%	
5443		Total Premium	
5443		11037	
Geographical Area India		Compulsory Deductible (IMT-22) 100	
Hypothecated (IMT-7) with: HDFC BANK LTD		Voluntary Deductible (IMT-22A) 0	

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 or Pace making d) Speed testing f) Reliability Trials g) Any purpose in connection with Motor Trade. Persons or Class of Persons entitled to drive: Any person including the insured, provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective learner's license may also drive the vehicle when not used for the transport of passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989. Limits of Liability: 1. Under Section II-1 (i) of the policy - Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988. 2. Under Section II - 1(ii) of the policy - Damage to Third Party Property - ₹ 1500000 3.P.A. Cover under Section III for Owner - Driver(CSI): ₹ 1500000 Terms, Conditions & Exclusions: As per the Indian Motor Tariff. A personal copy of the same is available free of cost on request & the same is also available at our website.

Warranted that the Assured named herein/owner of the vehicle insured holds a valid Pollution Under Control (PUC) Certificate on the date of commencement of this Policy. If the PUC is not found valid on the date of commencement of the Policy, the Company reserves its right to repudiate the Own Damage claim made under this Policy.
We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with the provision of chapter X, XI of M. V Act 1988. The stamp duty of ₹ 0.50 paid by Demand Draft, vide Receipt/Challan no. CSD/195/2019/5101 dated 31/10/2019 as prescribed in Government of Maharashtra Order No. Mucrank-2017/CR-97/M-1 dated the 09th January 2013. GST Registration No: 18AABCL5045N127. **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 entitles the insured to the insured. See the clause headed "WAIVER OF CERTAIN TERMS AND RIGHT OF RECOVERY" Disclaimer: The Policy shall be void from inception if the premium in full is not realised by the company. In the event of misrepresentation, fraud or non-disclosure of material fact, the Company reserves the right to cancel the Policy. Please note that the insured vehicle was pre-inspected and a report was prepared accordingly. The existing damages to the vehicle as mentioned in the report shall not be paid by the Company. The policy is issued basis the information provided by you, which is available with the company. In case of discrepancy or non recording of relevant information in the policy, the insured is requested to bring the same to the notice of the company within 15 days. GST for this invoice is not payable under reverse charge basis.

Branch: 6th floor, aditya building, lake road, g. s. road, Gangtok

For Claim/Policy related queries call us at: +91-22-6234 6234/+91-120-6234 6234 or visit Help Section on www.hdfcergo.com for policy copy/tax certificate/make changes/register & track claim

GST Registration No: 18AABCL5045N127

HSN Code 997134

Agent Name: OWENDRA KAMAL THAPA
Agent Code: 200378941241 Tel No: +91-9775333370 PO SP PAN No: ANXP70672R

For HDFC ERGO General Insurance Company L



Nargatua
Duly Constituted Attome

Scan the code for Instant Policy Info, Register/Track Claim, Renewal and Modifications in policy.

UNION OF INDIA Driving Licence
GOVERNMENT OF SIKKIM

SK01 2020 0001012

Date of Issue **14-08-2020** Validity **13-08-2030**

Date of Birth **09-08-1988** Blood Group **O+**

Name
RAMESH TAMANG

Father's Name
DHAN BDR TAMANG

Form 7 Rule 16(2)

SK01 2020 0001012

LMV **14-08-2020** MCWG **14-08-2020**

Mobile No. *******1360**

Endorsement Date **14-08-2020**

Endorsement No. **SK01 /PDL/0001012/2020**

Present Address
**TAMTHOK MAZUA,
 SORENG,
 Soreng, West District, SK, 737121**

Name / Designation of Issuing Authority
Ronraj Rai, VEHICLES INSPECTOR

Holder's Signature

Licencing Authority
**Mohit Venkta Division
 Issuing Authority
 Gangtok, Sikkim
 RTO, GANGTOK, EAST SIKKIM**

Form 7 Rule 16(2)

WOUND CERTIFICATE

No. **4029**

Hospital No. **1001682**

M. R. D. No.

Wounds or injuries found on the person of a male / female calling himself / herself.....

RAMESH TAMANG

Aged **36** years.

an inhabitant of **JORTHANG**

Who was sent with **A/H/O RTA (ROAD TRAFFIC ACCIDENT)**

From **B/W RANGPO & MELI**

And accompanied by..... for report

as to certain injuries said to have been caused **Trauma to (R) shoulder, (R) elbow**

E A/H/O RTA

and to be due to.....

Identificate Marks : (1)

(2)

The injured person was first seen by the undersigned at **11/12/2023** A.M. / P.M. on **@ 10:00pm**

and the examination was commenced at..... A.M. / P.M. on..... when

the following injuries were found:

- (1) X-Ray (R) shoulder **AP** } no bony injury
- (2) X-Ray (R) elbow — no obvious bony injury

The injured person was first seen by the undersigned at **10:15pm** A.M. / P.M. on **12/12/2023**

and the examination was found:

- (1) Abrasion 3cm x 1cm present over anterior aspect of (R) shoulder.
- (2) Swelling over occipital region (blunt trauma).
- (3) Small abrasion over (R) index finger.
- (4) Blunt trauma to proximal aspect of (R) forearm laterally.
- (5)
- (6)
- (7)

Opinion: The injury is SIMPLE / GRIEVOUS

Simple

REMARKS:

Patient was advised neurosurgery at STNH Hospital.

Signature: **Lal Roy**

Name: **Dr. L. Sellaraj Roy**

Reg. No.: **SNC - 1339**

Designation: **Dr. Lal Phangbam S. Roy**

Station:

Date: **11/12/2023**

Note: This form is to be filled in triplicate by the D.M.O. Who has attended the case, and the Original and

duplicate should be sent to the M.R.D.

WOUND CERTIFICATE

Hospital No. 991375

No. 4030

M. R. D. No.

Wounds or injuries found on the person of a male / female calling himself / herself.....

SABINA LIMBOO

Aged. 19 Yrs years.

an inhabitant of CHIROPANI, S/SIKKIM.

Who was sent with.....

From.....

And accompanied by..... for report

as to certain injuries said to have been caused by A/RTA around 7:00pm b/w

Malli & Rangpo.

and to be due to.....

Identificate Marks : (1)

(2)

The injured person was first seen by the undersigned at 9:30 A.M. / P.M. on 11/12/23.

and the examination was commenced at 9:35 A.M. / P.M. on 11/12/23. when

the following injuries were found:

(1) (R) mid shaft fracture femur.

(2) (R) patellar fracture.

The injured person was first seen by the undersigned at 9:30 A.M. / P.M. on 11/12/23.

and the examination was found:

(1) Abrasion 2cm x 2cm on (R) frontal region.

(2) Puncture wound, 1cm x 1cm on medial side of (R) knee.

(3) Laceration (6cm x 0.5cm) medial side of (R) leg.

(4) Laceration (4cm x 0.5cm) horizontally on medial side of (R) leg.

(5)

(6)

(7)

Opinion: The injury is SIMPLE / GRIEVOUS

Grievous, multiple fractures.

REMARKS:

(R) mid shaft femur comminuted fracture

(R) patellar fracture

Station:

Date: 11/12/23.

Note : This form is to be filled in triplicate by the D.M.O. Who has attended the case, and the Original and duplicate should be sent to the M.R.D.

Signature: Lai Roy

Name: Dr. L. Selvaraj Roy.

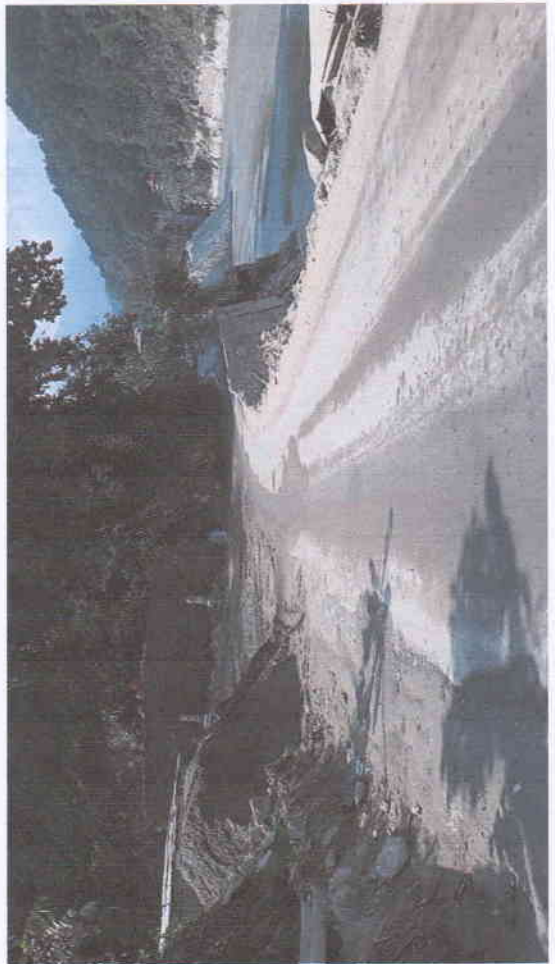
Reg. No.: SME - 13391

Designation: Dr. Lai Phangbam S. Roy

Junior Resident

Dept. of Emergency
5th Mile Tadong, Gangtok





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.	KALIMPONG PS CASE NO 160/23
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	KALIMPONG

1.	Date of Accident	11.12.2023	
2.	Time of Accident	17.30 HRS	
3.	Place of Accident	ANTARI JHORA, NH-10, NEAR MELLI BAZAR	
4.	Nature of Accident	Simple Injury Grievous Injury Fatal Damage/loss of the property Any other loss/injury	
5.	Offending Vehicle Details		
	Registration No.	WB 73D-5355	
	Make	Mahindra & Mahindra Limited	
	Model	Mahindra Bolero 2WD Pick up	
	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	Sujal Sarkar	
	Father's Name	Late Nishi Kanta Sarkar	
	Mobile No.		
	Address	Palash Sarani Road, Samar Nagar, ward No.46, PS Pradhan Nagar, Siliguri, Dist Darjeeling.	
	Driving Licence	Permanent Learner's Juvenile Without License Others (Specify)	
	Driving Licence No.	WB 73 2023 0006763	
	Validity of Licence	10.03.2043	
	Licensing Authority	L.A. Siliguri	
7.	Owner of offending vehicle		
	Name	Sanjay Kumar Sahani	
	Father's Name	Ram Pratap Sahani	
	Mobile No.	6296498617	
	Address	Prakash Nagar, ward No 43, PS Bhaktinagar, Dist, Jalpaiguri.	
8.	Insurance Details of offending vehicle		
	Policy No.	201330030122700263800000	
	Period of Policy	28.03.2024 (Midnight)	
	Name of Insurance Company	Liberty General Insurance Limited	
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.			
	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			
	Fitness details			
17.	Whether Permit and Fitness have been verified from the Authority <i>If yes, attach report</i> <i>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	(1) Ramesh Tamang & (2) Sabina Limbu	
26.	Age	(1) 09/08/1988 & (2) 31/03/2004	
27.	Occupation	(1) Govt. Employed & (2) Student	
28.	Nature of Injury	(1) Simple & (2) Grievous, Multiple fractures	
	Simple	(1) RAMESH TAMANG	
	Grievous	(2) SABINA LIMBU	
29.	Details of Injury		
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 Melli 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. 1998005444

Phone No. : 9932371025

P.S. KALIMPONG

Date

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.	KALIMPONG PS CASE NO 160/23
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	KALIMPONG

1.	Date of preparation of site plan	
2.	Type of collision(collison 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	
5.	Width of road	
6.	Place of accident	ANTARI JHORA, NH-10, NEAR MELLI BAZAR
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	Normal Road Grade Road Over Bridge Culvert Road Under Bridge River Bridge Vehicular Under Pass Limited Use Subway Causeway
iv.	Type of Road Surface	Bituminous / Asphalt Water Bound Macadam (WBM) / Metalled Roads Paver Block Road Gravel Road Murrum Road Earthen/Kutch Road
v.	Surface Condition	Good Reveling Loose Flooded Slippery/ Oily Muddy
		Corrugated / Wavy road Pot Holes Snowy Road Under Repair No Influence on Accident
vi.	Type of Carriageway	Single Lane (1 Way) Single Lane (2 Way) Immediate Lane 2 Lane (1 Way) 2 Lane (2 Way) 3 Lane (1 Way) 3 Lane (2 Way) 4 Lane Undivided (2 Way) 4 Lane divided (2 Way) 6 Lane Undivided (2 Way) 6 Lane divided (2 Way) 8 Lane divided (2 Way)

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. 1998005444

Phone No. : 9932371025

P.S. KALIMPONG

Date

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.	KALIMPONG PS CASE NO 160/23
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	KALIMPONG

Date of Mechanical Inspection	16.12.2023
Name of Motor Vehicle Inspector	SANJIB ROY
Registration No. of Motor Vehicle Inspector	029700-3

1.	Vehicle Registration No.	WB 73D-5355
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	MAHINDRA & MAHINDRA LIMITED
4.	Model Name	MAHINDRA BOLERO PICKUP
5.	Colour of vehicle	WHITE
6.	Engine Number	GHF 1B19053
7.	Chassis Number	MA1ZNGHKF1826946
8.	Location of vehicle inspection	
	Accident Site	ANTARI JHORA, NH-10 NEAR MELLI BAZAR
	Garage	
	Other (Specify)	

9.	In case of Commercial Vehicle	
	Details of Fitness	FITNESS UPTO 23.02.2024
	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	
	Wheels	
	Wipers	
	Mirrors	
	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 :

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.	KALIMPONG PS CASE NO 160/23
Date	12.12.2023
Under Section	279/337/338 IPC
Police Station	KALIMPONG

1.	Vehicle Registration No.	WB 73D-5355
	Validity Period	23.02.2024
2.	Engine No.	GHF 1B19053
3.	Chassis No.	MA1ZNHGKF1826946
4.	Category of Vehicle	LMV/ HMV/MGV
		Private or Commercial
5.	Vehicle Make & Model	
	Make	MAHINDRA & MAHINDRA LIMITED
	Model	MAHINDRA BOLERO PICKUP
6.	Owner Details	
	Name	Sanjay Kumar Sahani
	Address	Prakash Nagar, ward No 43, PS Bhaktinagar, Dist, Jalpaiguri.
7.	Details of Insurer	Liberty General Insurance Limited, Policy No-201330030122700263800000, Period of Policy - 28.03.2024 (Midnight)
8.	Details of Permit	
	Permit No.	
	Validity	
9.	Details of Fitness Certificate	
	Fitness Certificate No.	
	Validity	23.02.2024
10.	In case record not available, state reasons	

S.H.O./I.O P.I.S./EMPLOYEE No. 1998005444

Phone No. : 9932371025

P.S: Kalimpong

Date

5	One authorization letter			Kept at KPG PS Mal Khana
6	One Driving Licence having D/L No-WB 73 2023 0006763 in r/o Sujal Sarkar s/o Nishi Kanta Sarkar issued by L.A. Siliguri			
7	One original Certificate of Registration having Registration No SK01 PC2801 date of Regn. 10.Feb.-2020 regn validity 09-Feb.2035 Chassis No ME4JF49MMKG006454, Engine NO-JF49EG4009382 owner name Ramesh Tamang s/o Dhan Bdr Tamang Vehicle class- M-cycle/Scooter Make's name Honda Motor Cycle and Scooter India (P) Ltd. Model name Activa 125 Disc, Colour Midnight Blue metal.	KPG PS PR No-252/2023	Ramesh Tamang S/O Dhan Bahadur Tamang Of Chhota Samdong, Tamthok Arubotay, near L.P.S. School, Majuwa, PS Naya Bazar Dist Soreng, Sikkim-737121.	Returned to owner under zimmanama.
8	One original Certificate of Insurance cum Policy Schedule Policy No 2312203252156600000 period of insurance from 23 rd Jan 2020 16.29hrs to 22 nd Jan 2025 midnight issued date 23.01.2020 by HDFC ERGO General Insurance Company Ltd.			
9	One original driving licence having D/L No-SK 01 20200001012 date of issue 14.08.2020 validity 13.08.2030 in the name of Ramesh Tamang issued by L.A.RTO Gangtok East Sikkim.			

11. A Number of accused persons charge-sheeted: 01 (One)
 B Number of accused persons not charge-sheeted: Nil
12. Particulars of accused charge-sheeted:

i)	NAME	SUJAL SARKAR
ii)	FATHER'S /HUSBAND'S NAME	LATE NISHI KANTA SARKAR
iii)	DATE/ YEAR OF BIRTH	1992
iv)	SEX	MALE
v)	NATIONALITY	INDIAN
vi)	RELIGION	HINDU
vii)	WHETHER SC / ST	-
viii)	OCCUPATION	DRIVER
IX)	ADDRESS	PALASH SARANI ROAD, SAMAR NAGAR, WARD NO-46 PS PRADHAN NAGAR, SILIGURI, DIST DARJEELING..
X)	PROVISIONAL CRIMINAL NO	
XI)	REGULAR CRIMINAL NO	
XII)	DATE OF ARREST	
XIII)	DATE OF RELEASE ON BAIL	15/12/2023
XIV)	DATE ON WHICH FORWARDED TO COURT	
XV)	UNDER ACTS AND SECTIONS	279/337/338 IPC
XVI)	NAME (S) AND ADDRESS (ES) OF SURETIES	
XVII)	PREVIOUS CONVICTIONS WITH CASE REFERENCE	
XVIII)	FORWARDED/BAILED BY POLICE/UNDER POLICE CUSTODY/ BAILED BY COURT/IN JUDICIAL CUSTODY/ ABSCONDING / PROCLAIMED OFFENDER:	BAILED BY COURT

7	RAMESH TAMANG S/O DHAN BAHADUR TAMANG OF CHHOTA SAMDONG. TAMTHOK, ARUBOTEY NEAR L.P.S. SCHOOL MAJUWA PS NAYA BAZAR, DIST SORENG, SIKKIM- 737121. (M/No 9733291360)	WITNESS U/S 161 Cr. P.C. (VICTIM)
8	BIKRAM KUMAR SUBBA S/O SRI KUMBA LAL LIMBU OF CHISOPANI AMBOTEY PS JORETHANG DIST NAMCHI SIKKIM. M/No 9064940728)	SEIZURE LIST WITNESS
9	KIRAN RAI S/O SRI KARNA BAHADUR RAI OF CHISOPANI AMBOTEY PS JORETHANG, DIST NAMCHI, SIKKIM. (M/No 9647785097)	-DO-
10	SABINA LIMBU D/O BIR SINGH LIMBU OF CHISOPANI AMBOTEY PS JORETHANG, DIST NAMCHI, SIKKIM. (M/No 7407214870)	WITNESS U/S 161 Cr. P.C. (VICTIM)
	SANJIB ROY MECHANICAL EXPERT, PANPARA, JALPAIGURI. (M/No 6294085665)	M.E.
	DR LAL SELVARAJ ROY (Reg. No- SMC-1339) JUNIOR RESIDENT DEPT OF EMERGENCY OF CENTRAL REFERRAL HOSPITAL, 5 TH MILE, TADONG, GANGTOK, SIKKIM. (M/No 8837267607)	M.O.
	SI SHANKAR DEY OF PS KALIMPONG. (M/No 7908387998)	R.O.
	ASI SAMIR LEPCHA OF KALIMPONG POLICE STATION.(M.NO 9932371025)	I.O.

15. If F.R. is false, action taken or proposed to be taken u/s 182/211 I.P.C.

.....

...

16. Result of laboratory analysis

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17. Brief facts of the case: on 11.12.2023 at about 15.05 hrs Binod Sah s/o Late Shibnath Prasad of Melli Bazar, PS Kalimpong lodge a written complaint to the effect that on 11.12.2023 around 17.30 hrs. while the complainant was visiting the road construction work at Antari jhora a vehicle bearing No WB 73D-5355 (Pickup) coming from side turn over in the middle of the road and dash the scooty bearing No SK 01PC- 2801 as a result the scooty rider and the lady pillion rider got severe injury. They were sent to the Sikkim Manipal Hospital. This incident happened because of the rash and neglect driving of the pickup driver. On the basis of written complaint, case is begin and endorsed me to investigation of case. I ASI Samir Lepcha of Melli OP took up its investigation.

Despatched ata.m./p.m.

Samir
24.02.2024

Signature of the investigation
Submitting the Final Report/Charge Sheet

Name SAMIR LEPCHA
Rank A.S.I.
Number, if any 267
Date 24/02/2024

Forwarded

Samir

Inspector in-charge
Kalimpong Police Station
Dist Kalimpong

During the investigation, I visited the P.O. and prepared a rough sketch map along with its index. Examined the witnesses and recorded their statement u/s 161 Cr.P.C. in separate sheet. I seized the damaged vehicle and scooty and its vehicular papers under proper seizure list. In the course of the investigation, both seized damaged vehicle and scooty had been done the mechanical examination by the Mechanical Expert and collected the report from Mechanical Expert. Later, both seized vehicles had returned to their actual owner as per kind order of Ld Court under proper zimmanama.

During the investigation I collected injury reports of victims from the Superintendent of Central Referral Hospital, Manipal, Upper Tadong, Gangtok, East Sikkim

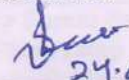
In course of investigation, found the offender driver of vehicle bearing Registration No WB 73D5355 who driven the transport vehicle with non transport holding driving licence. Therefore driver is liable to be prosecuted U/S 181 of M.V.Act for plying vehicle without effective and valid driving licence which violates of section 3,4 & 5 of motor vehicle Act 1988.

During the investigation of case a prima facie charge u/s 279/337/338 IPC R/W sec. 181 of M.V. Act has been well established against the driver Sujal Sarkar (32yrs) s/o Late Nishi Kanta Sarkar of Palash Sarani Road, Samar Nagar, Ward No 46, PS Pradhan Nagar, Siliguri, Dist. Darjeeling.

I consulted the merit of the case with my superior who advised me to submit charge sheet in this case.

Hence, I am submitting charge sheet vide Kalimpong PS charge sheet No 33 /2024 dt.24/02/2024 u/s 279/337/338 IPC R/W sec. 181 of M.V. Act against Sujal Sarkar (32yrs) s/o Late Nishi Kanta Sarkar of Palash Sarani Road, Samar Nagar, Ward No 46, PS Pradhan Nagar, Siliguri, Dist. Darjeeling to stand for his trial in the open court of law. There is lots of evidence to prove charge during trial, witnesses may kindly be summoned. The complainant has been duly informed the result of investigation.

Submitted


24.02.2024
(ASI Samir Lepcha)
Melli OP, Kalimpong P.S.
Date 24/01/2024.

CHARGE SHEET / FINAL REPORT

(Under Section 173 Cr.P.C.)

IN THE COURT OF **Ld. CHIEF JUDICIAL MAGISTRATE, KALIMPONG.**

1. Dist. Kalimpong PS Kalimpong Year 2023 FIR No 160 Date 12/12/2023
2. Charge Sheet No /2024 3. Date /02/2024
4. i) ActIPC..... Section.....279/337/338
 ii) Act ...Motor Vehicle Act 1988.... Section 181.....
 iii) Act Section
 iv) Other Acts and Sections
5. Type of Final Report: Charge Sheet/Untraced/Unoccurred/ Not Charge Sheeted for want of evidence Charge Sheet.....
6. If F.R. unoccurred : False / Mistake of fact / Mistake of Law / Non cognizable / Civil nature
7. If Supplementary or Original Original
8. Name, Rank and Number (if any) of the I.O. (s).... ASI-267 Samir Lepcha
9. a) Name of Complainant / Informant.....Binod Sah
 b) Husband's NameLate Shibnath Sah
10. Date on which the Complainant / Informant was informed of the result 24/02/2024.
11. Detail of Properties / Articles / Documents recovered / Seized during investigation and relied upon separate list can be attached, if necessary:

Sl. No 1	Property Description 2	Estimated Valued (in RS) 3	P.S. Property Register No 4	From whom/where Recovered or Seized 5	Disposal 6
1	One white colour Bolero pickup bearing Regd. No WB 73D-5355 with key right side body slightly damaged condition.		KPG PS PR No- 247/23	S.I. Deepak Thapa, O/C Melli OP. Under PS Kalimpong.	Returned to owner of vehicle under proper zimmanama.
2	One dark blue colour Activa 125 Scooty bearing Regd. No SK 01PC 2801 with key right side slightly damaged condition.				
3	One photocopy of Certificate of Registration having Regtration No WB 73D-5355 Ragistration date 17.04.2015 in r/o Sanjay Kr. Sahani s/o Ram Pratap Sahani of Prakash Nagar PS Bhaktinagar, Jalpaiguri Class of vehicle Goods Carrier Make's Name Mahindra & Mahindra Ltd. Classification Mahindra Bolero 2WD pickup Engine No- GHF 1B19053, Chassis No- MA1ZN2GHKF1B26946.		KPG PS PR No- 250/23	Sanjay Kumar Sahani S/O Ram Pratap Sahani Of Prakash Nagar, Sahani Busty, PS Bhaktinagar, Dist. Jalpaiguri.	-DO-
4	One Certificate of Insurance cum policy Schedule having Policy No 201330030122700263800000 period of insurance fro 00.00hr of 29.03.2023 to midnight of 28.03.2024.				

(Attach Separate sheet, if necessary)

3. Particulars of accused persons not charge-sheeted (suspected):

- i) Name
- ii) Father's/ Husband's Name
- iii) Date/Year of Birth.....
- iv) Sex:.....
- v) Nationality:
- vi) Religion:
- vii) Whether SC / ST:
- viii) Occupation:
- ix) Address:
- x) Provisional Criminal No:
- xi) Suspicion Approved: Yes/No
- xii) Forwarded/Bailed by Police/Under Police Custody/ Bailed by Court/In
Judicial Custody/ Absconding / Proclaimed
Offender:.....(Bailed by Court).

xiii) Under Acts and section:

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 7
1	2	3	4	5	6	
1.	BINOD SAH S/O LATE SHIBNATH PRASAD OF MELLI BAZAR PS & DIST KALIMPONG. (M/No 9832056583)					COMPLAINANT
2.	CV-289 VIVEK SUBBA OF MELLI OP UNDER PS KALIMPONG. (M/No 8167402698)					WITNESS U/S 161 Cr. P.C.
3.	S.I. DEEPAK THAPA O/C MELLI OP UNDER PS KALIMPONG. (M/No 9932843791)					-DO-
4.	S.I. ALAMGIR SARKAR OF MELLI OP UNDER PS KALIMPONG. (M/No 985150087)					SEIZURE LIST WITNESS
5.	S.I. JONATHAN LEPCHA OF MELLI OP UNDER PS KALIMPONG. (M/No 629407831).					-DO-
6.	L/CV-965 YAMIMA BISWAKARMA OF MELLI OP UNDER PS KALIMPONG. (M/No 9083167271)					-DO-