FORM 54 [Sec Rule 150(a) and (2)] **Accident Information Report**

- 1. Name of the Police Station: Pedong Police Station
- 2. CR. No. /Traffic Accident Report:Pedong ps case no: 16/24 date- 23/10/24 U/S 281/324(4) BNS R/W SEC 03 OF PDPP ACT
- 3.Date, Time and Place of the accident: ON 22/10/24 at 11:30 hrs, at 21 mile pedong ps dist - Kalimpong
- 4. Name and full address of the injured / Deceased:
- 5. Name of the hospital to which he/she was moved/ removed: Nil
- 6. Registration Number of vehicle and the type of the vehicle: WB76B7155
- 7.Driving License particulars:Laxuman Biswakarma S/O LT. SM Biswakarma of upper merry villa H.C road hum tukdah Khasmahal, Darjiling
- 8.Name and address of the owner of the vehicle:Biswajit Debnath S/O Sukharanjan Debnath of Dasharath Pally, Kalibari road ,Sevoke road Rajgang ,jalpaiguri
- 9. Name and address of the Insurance Company with whom the vehicle was insured and the particulars of the Divisional Officer of the said insurance company:SBI GENERAL INSURANCE
- 10.Policy / Insurance Certificate and the date of validity of the Insurance Policy/Insurance Certificate Policy No: P031101241334623 Valid till midnight of 10/01/2025
- 11.. Registration particulars of the vehicle (Class of vehicles):TATA Motors ,LPT 1109-EX2 Tipper
- 12.. Permit Particulars:
- 13. Action taken if any, and the result there of: Pedong ps case no: 16/24 date- 23/10/24 U/S 281/324(4) BNS R/W SEC 03 OF PDPP ACT

Investigation officer.
ASI Sudap Sanyal
Redomp P.D

FIRST INFORMATION REPORT

(First Information of a cognizable crime reported under section 173 B.N.S.S.)

 2. 3. 	(iv) Year (v	616.	Act	2/24Time Time	me 17,15hm; 11,30 hm	
4. 5. 6.	Type of Information: Written/Oral/Ele If registered after Preliminary Enquiry, Place of occurrence: (a) Direction and of (b) Address	reference no. of	Such enquiry:	ten,	the Police Station.	
(c)	in case outside limit of this Police Statio	n, then the name	of P.S	J	***************************************	
8.	Complainant/Informant: (a) Name Ashok Tawak (b) Father's/Husband's name (c) Date/Year of Birth (d) Nationality (e) Address (f) Mobile no 77978734 (g) UID no./Any other ID no. (h) E-mail id Details of known/suspected/unknown/Reasons for delay in reporting by the Co	incty, Al	particulars (attacl	h separate sheet	if. Kalimfon	a o
10.	Particulars of properties stolen/involved	d. (Attach separat	e sheet, if necessa	ry):		
12. I 13. F	Total value of properties stolen/involved nquest report/ U.D Case no. if any: IR contents: (Attach separate sheets, if	required): [] I.R.:	eorginu	i, write	n Guplain	H
4. 4	action taken: Since the above report reve	eals commission of	of offence(s) u/s			
ake i)R re	Registered the case and took up inv up the investigation OR transferred to Particle of the case of the	restigation or dire	ected ASE	Sudip So	nt of jurisdiction	

No 23/10/24-491911 थाना मारी हैं। feerived on, 23/10/4 at 17,15h Wild Pedong PC & DENO 616/24 \$1-23/10/24 and Standay Pedong Ps. Careno 16/24 जिल्ला आलेगाई, 46,23/16/24 MS 28/324 (A) Of BNS Act S. See 030f. P.D. P. P.Act. Coloure Pedong Polices Station
Pedong Police Station
Pedong Police Station
Police Station पीलाई डपीमा भरे वापत मार ! म भी अर्थन राज्यहाँ मिर्ग से हर्मिन्डाइट राज्यहाँ पर्योद्ध, असी आलगड़ा निवासी डेश्वरलाई सुरिया बाह्य, कि 20/10/24 की कि सम्मा 11:30 वर्ड मिड्रान भारती रुपान 10879/185179 की पाला हैं भी कि पाना प्रका वनाही केमा। श्रामाणा पका हो छान् आ पुरि को हो सका प्रदेश Cateur भारतो क्यान model Nuber 2018 Engine no, F810 IN STOSETS, Charis xhumber NA 3ENB-11501878747 15 की भारी लग्ने डिच विद्यम था भाइलका सिम्प्यूड़ी वर्ष आहर आदेश करान, carrier, होतुन केडान सार्थ विज्ञाल सक्ता लाई EPR GUEST E/ उन्हें विष्णं अमि इन्हर्ते अनिनी काडवाही बरिहिमा. जार्बीस अति निवंदा यहिं। 312/100 01215

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.	Redong P.s Care No - 16/24
Date	23.10, 2024
Under Section	281/324 (4) DNS RIV Sec 03 of PDPP ACT
Police Station	Pedona Prs

1.	Date of Accident	on	22, 10,	2024

in many bridge of the characteristics

2.	Time of Accident	11.30 hm	
3.	Place of Accident	21 mile, Redong	
4.	Source of Information	Driver/Owner	9 5
		Victim Witness	
		Hospital	
	-	Good Samaritan	
		Police	
		Others (Specify)	
	Name, mobile number & ac	Idress of the Informant	
Name			
	Mobile No.		
2	Address		
5.	Nature of Accident	Injury	
		Fatal	
	1 .0	Damage/loss of property	
		Any other loss/injury	
- 7	Number of Vehicles		
	involved	Yes No	
	Whether Registration Number of the Offending		
	Vehicle known		
	Whether offending Vehicle	Yes No	
	impounded by the police		
	Whether the driver of the offending vehicle found on		
	the spot		
	Number of Fatalities		
	Number of Injured		
6.	Details of the Hospital when	ca victim(s) takan	
0.		e vicini(s) taken	
	Hospital Name		
	Address		
	Doctor's Name		
7.	Availability of CCTV	Yes No	-
	Footage If yes, CCTV Footage be		
	preserved and be filed with		
	DAR		
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 B 7255	
-	Driver Details		
			1
	Name of the Driver	Lakmon Birstakarma	
	Address of Driver	Uplen Mon Villa, H.c Road Thurstan Wharmond Dan Teeling	
	Mobile No. of Driver	9735094312	
	Owner Details		
	Name of the Owner	Marie Control of the	
	Tunio Onnio		
	Address of Owner		
	Address of Owner Mobile No. of Owner		

Insurance Policy No. Period of Insurance Policy Name Insurance Company Address Insurance of Company Details of Victim(s) 9. Address & Contact Details Deceased /Injured Name i. ii. iii. iv. V. vi. 10. Other Accident Details 23.10. 2024 Reporting Date & Time i. ii. Landmark Fatal iii. Severity Grievous Injury Simple Injury Hospitalized Simple Injury Non Hospitalized No Injury Death Injured Count of iv. Drivers Passengers Pedestrians Animal Vehicle to Vehicle Collision Type Vehicle to Pedestrian Vehicle to Bicycle Vehicle to Tricycle Vehicle to Animal Driven Cart Vehicle to Animal Skidding Head on Collision Collision Nature 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
	E .	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
	*	Snow
		Smoke/ Dust
		Strong WindCold
		Hot
ix.	Light Condition	Day
e.		Twilight
		Darkness with street lights on
		Darkness with poor street light
		Darkness-No street light
X.	Accident Spot	Residential Zone
Λ.	- Lovidenia Spor	Market Zone

		Institutional Zone
		Open Commercial
		ZoneSchool Zone
		College Zone
		Other Educational Institutional Zone (Specify)
	F2	Govt. Institutional Zone
		Hospital Zone
		Industrial Zone
		Harbour Zone
xi.	Visibility	Less than 25 Meters
		25 Meters
		50 Meters
		75 Meters
		100 Meters and Above
xii.	Load Condition (1)	Excess Passengers
		Normally Loaded
		Empty
		Not Known
xiii.	Load Condition (2)	Excess Goods
		Goods Overheight
		Goods Rear Overhanging
		Goods Side Overhanging
		Normally Loaded
		Empty
		Not Known
xiv.	Road Classification	Expressway
		National Highway
		State Highway
		Major District Road
	1	Other District Road
	196	Village Road
		Arterial Road
		Sub Arterial Road
		Collector Road
		Local Road
XV.	Local Body	Corporation
		Municipality
		Panchayat

vvi	P.I.S./EMPLOYEE No.	
XVI.	P.I.S./ CIVIL DO LED 190.	

S.H.O./I.O

Phone No. : 700 1962140

P.S.

: Redong : 29.10.2024 Date

Documents to be attached:

Copy of FIR

Images/ Videos to be attached:

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