

FIRST INFORMATION REPORT

(Under Section 154 Cr.P.C.)

GPA-81 11 30

1. District: NORTH EAST DELHI P.S. 14 B Block, Year: 2013 FIR No. 551 Date: 14-12-2013

2. Act(s):
(a) IPC 154
(b)
(c)
(d)
Section(s):
314

3. Occurrence of Offence:

(a) Day: Saturday

Time Period:

(b) Information received at P.S.:

(c) Criminal Query Reference:

Date From: 14-12-2013

Time From: 12:30 hrs

Date: 14-12-2013

Entry No. 27A

Date To: 14-12-2013

Time To:

Time: 12:00 hrs.

Time: 12:30 hrs

4. Type of Information: WRT (L/N)

5. Place of Occurrence:

(a) Direction and Distance from P.S.:

(b) Address: H-BLOCK NEAR PHILMUL METRO STATION DELHI

(c) In case, Outside the limit of the Police Station:

Name of P.S.:

Post No. 14

District:

6. Complainant/Informant:

(a) Name: VINOD KUMAR JAIN (CO) LT DELP CHAND JAIN

(b) Date Year of Birth: 1913

Nationality: INDIA

(c) Passport No.:

Date of Issue:

Place of Issue:

(d) Occupation:

(e) Address: 92/53, GALI NO. 12, KALASH NAGAR, DELHI-31.

7. Details of Known Suspect/Unknown accused with full particulars (attach separate sheet if necessary):

8. Reason for delay in reporting by the complainant/informant: NO DELAY

9. Particulars of the property stolen/involved (attach separate sheet if necessary):

S.No	Property Type-(Description)	Est. Value(Rs.)	Status
(1)	MISC DOCUMENTS IN P BAG CONTAIN		Stolen
(2)	INDIAN RUPEE (TWENTY THOUSAND) R.P.	20000	Stolen

(3)

10. Total value of property stolen: 20000

11. Inquest Report/U.D Case No., if any:

nil Kumar & Mr. Satish Kumar in favour of Mr. Vinod Kumar Jain in respect of the said property. Original and

7-Original And Photocopy of ATS executed by Mr. Ajay Kumar,
Mr. Anil Kumar & Mr. Satish Kumar in favour of Mr. Vinod Kumar Jain in respect of the said property.

8-Original and Photocopy of Will executed by Mr. Ajay Kumar in favour
of Mr. Vinod Kumar Jain in respect of the said property.

9-Original and Photocopy
of Will executed by Mr. Anil Kumar in favour of Mr. Vinod Kumar Jain in respect of the said property.

10-Original Photocopy of Will executed by Mr. Satish Kumar in favour
of Mr. Vinod Kumar Jain in respect of the said property.

Station House Officer:
Crime Branch, Delhi:

Note:

- (i) This is a digitally signed document
- (ii) For verification visit 'Lost Articles Report' module on www.delhipolice.nic.in
- (iii) Authority issuing duplicate document/article may obtain proof of identity

Disclaimer

- (i) This application is for lodging report of Article/Document lost in Delhi
- (ii) Report lodged under this application is not a subject matter for enquiry/investigation
- (iii) In case loss is due to theft or any other crime, contact nearest Police Station
- (iv) False report to Police is a punishable offence



फॉर्म संख्या 10/6
Form No. 10A

दिल्ली संघ राज्य
UNION TERRITORY OF DELHI

47876

(नियम संख्या 14 देखिए)
(See Rule 14)

विस्तृत मृत्यु प्रमाण-पत्र (विस्तार से)

SPECIAL CERTIFICATE OF DEATH (DETAILED)

जन्म तथा मृत्यु पंजीकरण अधिनियम, 1969 की धारा 17 के अन्तर्गत दिया गया।
Issued under Section 17 of the Registration of Births & Deaths Act, 1969.

यह प्रमाणित किया जाता है कि निम्नलिखित विस्तृत सूचना मृत्यु के मूल स्रोत से ली गई है
This is to certify that the following detailed information has been taken from the original record of the Death which is in the register for (स्थान) के रजिस्टर में दर्ज है। (Local area)

पंजीकरण संख्या: 357 पंजीकरण की तिथि: 25-2-91
Registration No. Date of Registration

1. मृत्यु की तिथि/Date of Death: 15-2-91
2. मृत्यु का पूरा नाम: Bishan Singh
Full name of the deceased
3. पिता/पति का नाम/Name of the Father/Husband: B. P. J.
4. मृत्यु का स्थान (पूरा पता): Sit. St. 14/2
Place of Death (Full address)
5. आयु/Age: 68
6. लिंग (स्त्रीलिंग/पुंलिंग)/Sex (Male/Female): F
7. वैवाहिक स्थिति (अविवाहित/विवाहित/विधवा/विधवा/अलग/अलग)
Marital Status (never Married/Married/Widow/Widower/Separated/Divorced): 1st
8. व्यवसाय/Occupation: 1st
9. धर्म/Religion: 1st
10. नागरिकता/Nationality: 1st
11. स्थाई निवास स्थान का पूरा पता: 1st, Gali No. 2, Kailash Nagar, Delhi-110015
Permanent Full address
12. बीमारी की अवधि/Duration of illness: 3 days
13. क्या मृत्यु का कारण चिकित्सक द्वारा प्रमाणित था? (हां/नहीं)
Whether Medically Certified (Yes/No): Yes
14. चिकित्सा की क्रिया (एलोपैथिक/आयुर्वेदिक/यूनानी/होम्योपैथिक/अन्य)
Kind of Medical attention received (Allopathic/Ayurvedic/Homoeopathic/Others): Allo.
15. टिप्पणी/Remarks:

तिथि/Date

Sub-Registrar

प्रमाणित करने वाला

Signature of the Issuing Authority
(Signature)

नोट:—मृत्यु के सम्बन्ध में पंजी में दिए गए मृत्यु के कारणों का विवरण नहीं दिया जाएगा।
Note:—In case of death, no particulars shall be made of particulars regarding the cause of death as entered in the register.



1. पंजीकरण का क्रम संख्या.....
Serial No. of Registration
2. प्रार्थी का नाम.....
Name of applicant
3. प्रतिलिपि के लिए प्रार्थना-पत्र की तिथि.....
Date of application for copy
4. प्राप्ति की तिथि.....
Date of receipt
5. रिकॉर्ड की खोज की फीस.....
Record Searching fee
6. डाक व्यय.....
Postage charges
7. प्रतिलिपि बनाने का व्यय.....
Copying charges
8. प्रतिलिपि बनाई गई तिथि.....
Copy prepared on
9. प्रतिलिपि प्रेषित की गई तिथि.....
Copy sent on
10. प्रतिलिपि प्रेषित की गई तिथि.....
Copy delivered on
11. प्रतिलिपि बनाने वाले की हस्ताक्षर.....
Signature of copyist

307097

18/3

आमदनी - 342/पि० आर० ३० एंड एम०/३७ - 29-3-87 - 1,50,000.

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