

Specimen copy of the Injury Certificate

Police Station.....

To,

The Sub-Inspector of Police.....

Sir,

I have the honour to forward herewith the result of my examination of

..... Son / Daughter of

..... Resident of

.....

1. Serial Number
2. Exact date, time and place of the injured person.....
.....
3. Name, Age, Sex and occupation of the injured person
4. Address of the injured person
5. Marks of Identification
 - a.
 - b.
6. Name and address of Accompanying person
7. Name and Number of Police Constable.....
8. Consent of the Injured Person for Examination

(Signature/ Thumb Impression)

1	2	3	4	5	6	7
Name of injury	Size of injury	Part of Body	Simple, Grievous or Dangerous	Kind of Weapon	Type of weapon	Remarks

(Signature of Doctor)

Designation

Date