

IN THE HIGH COURT OF JUDICATURE AT MADRAS

DATED: 29-07-2026

CORAM

THE HON'BLE MR JUSTICE G.K. ILANTHIRAIYAN

WP CrI. No. 1334 of 2025

Go Digit General Insurance Company Ltd
Having office at No.528/559,
Anna salai,
Above Skoda Showroom,
teynampet, Chennai-600018.
Rep by its Manager.

..Petitioner(s)

Vs

1. The State of Tamil Nadu
Department of Home Affairs,
Fort St. George,
Chennai-600 009.
2. Director General of Police
Tamil Nadu Police Headquarters,
Dr. Radhakrishnan salai, Mylapore,
Chennai-600 004.
3. The Additional Director General of Police
Crime Branch,
No.132, Commissioner Office building,
EVk Sampath Road,
Vepery, Chennai-600007.
4. The Deputy Inspector of Police (Traffic)
Crime Branch,
No.132, Commissioner Office building,
EVk Sampath Road, Vepery, Chennai-600007.
5. Deputy Inspector General of Police
Crime Branch,
No.132, Commissioner Office building,
EVk Sampath Road, Vepery, Chennai-600007.



6. The State Crime Records Bureau
Additional Director General of Police,
No.95, Greenways Road,
MRC Nagar, Raja Annamalaipuram,
Chennai-600028.

..Respondent(s)

Prayer: Writ Petition (Criminal) filed under Article 226 of the Constitution of India, to issue a Writ of Mandamus, directing the 1st respondent to form a Special Investigation Team (SIT) at every District Level and provide necessary financial and administrative support to it to investigate the fraudulent claims relating to fake accident, misrepresentation of facts, fake insurance policies, fake injuries, fake medical report and bills and initiate appropriate criminal action against the wrongdoer under the provisions of IPC/BNS or authorize the District Crime Branch, Economic Offences Wing to investigate such suspicious or fraudulent insurance claims to take it to its logical end.

For Petitioner(s): Mr.N.Shylappa Kalyan,

For Respondent(s): Mr.R.Ganesh Kumar,
Counsel for Government of Tamilnadu (CrI.Side)

ORDER

This Writ Petition has been filed seeking a direction to the first respondent to constitute Special Investigation Team (SIT) at the district level and to provide the necessary financial and administrative support for conducting a comprehensive investigation into fraudulent insurance claims involving fake accidents, misrepresentation of facts, forged insurance policies, fabricated injuries, and false medical reports and bills, and consequently to initiate



appropriate criminal proceedings against the persons responsible in accordance with the provisions of the penal law.

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2. Accordingly, the Tribunals are also passing awards in favour of fraudsters based on misplaced sympathy. Ultimately, the Insurance Company is the one that suffers the loss in every such claim. As a result, the financial losses incurred by Insurance Companies due to these fraudulent claims are increasing day by day. Further, there appears to be an unholy nexus among fraudulent claimants, the insured, drivers, auto mobile repair shops, police men and but not least some members belonging to the noble professions, including lawyers and doctors. Consequently, the Insurance Company becomes one of the principal victims of such fake claims arising out of false and fabricated accident case

3. As far as the petitioner is concerned, he had earlier filed Crl.O.P.No.2302 of 2021 seeking a direction to constitute a Special Investigation Team (SIT), preferably headed by Retired Judges of this Court, to investigate the matter. The petitioner had also filed another Crl.O.P.No.44174 of 2021 seeking transfer of the investigation relating to complaints concerning fake insurance policies.

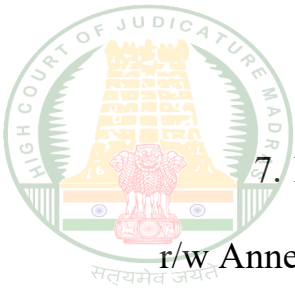


4. This Court, by an order dated 09.02.2021, directed the respondent police to complete the investigation and file a final report. In such circumstances, it becomes necessary to constitute a Special Investigation Team (SIT) to conduct a comprehensive investigation into the fraudulent claims based on false and fabricated records, with a view to identifying the offenders and preventing such fraudulent claims in future.

5. At this juncture, it is relevant to extract the provisions under 159 of MV Act, 1988 (Act No.59 of 1988) as amended by the Motor Vehicles Amendment Act, 2019 Act No.32 of 2019:

“ 159. Information to be given regarding accident- The police officer shall, during the investigation, prepare an accident information report to facilitate the settlement of claim in such form and manner, within three months and containing such particulars and submit the same to the Claims Tribunal and such other agency as may be prescribed”.

6. A reading of Section 159 of the Motor Vehicles Act, 1988 makes it clear that it aimed to arrive correct conclusions arising out of an alleged motor accident. The Section places both claimants and the insurance company in the equal foot to advance the cause of correct insurance claims and curb the false claims.



7. It is also relevant to extract the Rule 150A it enshrined Section 150A

r/w Annexure 13 Procedure No.25 as follows:

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150 A. A procedure for investigation of road accident:-

“ The procedure to be followed for investigation of all accidents arising out of the use of the motor vehicles shall be in accordance with Annexure XIII and in the manner of submissions and form, including electronic submissions on such portal as may be specified”

“ Annexure -XIII

Procedure for Investigation of Motor Vehicle Accidents.

25. Duty of Insurance Companies to verify the claim-

The Insurance companies are duty bound to verify the correctness/genuineness of every claim. The Insurance Companies shall direct their own officer(s) or appoint an investigator of surveyor to verify the claim.

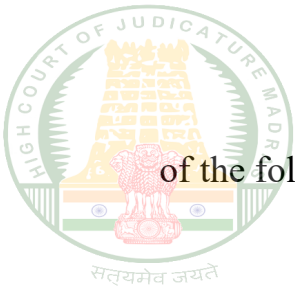
If the statements made in the DAR are found to be incorrect, the Designated Officer shall send the copy of the report of the surveyor/investigator to the Deputy Commissioner of Police Concerned. If the Insurance Company, upon investigation, finds a case of fake accident, the Insurance Company shall be at liberty to file an application before the Deputy Commissioner of Police concerned to requisition the call detail record (CDR) of the driver of the offending vehicle



8. The said provision clearly empowers the insurance companies to investigate motor accident claims through their own independent sources. In cases where any doubt arises regarding the genuineness of a claim, the insurance companies may seek and obtain the call detail records (CDRs) of the drivers of the vehicles involved, subject to the procedure established by law. Such records play a major role in the investigation process by assisting in proving or disproving the facts and circumstances relating to the alleged accident.

9. In these circumstances, the petitioner submitted a representation seeking the institutional implementation of Annexure XIII – Procedure No.25 under Rule 150A of the Central Motor Vehicles Rules, 2022, and also requested the constitution of an effective mechanism to investigate fraudulent motor accident claims. However, no action has been taken on the representation submitted by the petitioner.

10. Infact, the Hon'ble Supreme Court of India in the case of ***Safiq Ahmad Vs. ICICI Lombard Insurance Company CO.Ltd., and others*** in S.L.P.No.1110 of 2017 directed the respective State Governments to form Special Investigation Team (SIT) to enquire in the cases of fake claims under the Motor Vehicles Act and also the Workman Compensation Act, arising out



of the following categories namely

- i) Non-road accident injury-death converted into road accident claims;*
- ii) fraudulent implantation of vehicle;*
- iii) false implantation of drive;*
- iv) claimant implantation*
- v) multiple claims at a different territorial locations for compensation out of injury/death caused arising out of the same accident i.e., claims are being filed both before the Motor Accident Claims Tribunal as well as before the Labour Court.*
- vi) fake/fabricated insurance policies; and*
- vii) fake/fabricated income documents/medical documents for exaggerated compensation.*

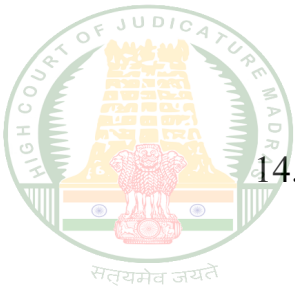
However, the aforesaid directions issued by the Hon'ble Supreme Court of India have not been effectively implemented by the concerned authorities.

11. A perusal of the Status Report filed by the Assistant Inspector General of Police reveals that the proposal to constitute a Special Investigation Team (SIT), headed by an officer not below the rank of Additional Director General of Police, is not practically feasible due to administrative and logistical constraints.



12. Further, it is not possible to constitute a Special Investigation Team in every district under the leadership of an officer of the rank of Additional Director General of Police. It is also stated that the Additional Director General of Police is already entrusted with supervising investigations relating to offences under the Tamil Nadu Protection of Interests of Depositors (in Financial Establishments) Act, 1997 (TNPID Act), and other special enactments. Consequently, effective investigation into cases involving fraudulent insurance claims has been considerably hampered.

13. Further, it may not be feasible for the Economic Offences Wing alone to undertake the investigation of all such cases, having regard to the shortage of manpower and the large volume of independent cases requiring investigation. Therefore, it is suggested that cases involving fake and fraudulent insurance claims can be investigated by the Assistant Commissioners of Police attached to the City Crime Branch in urban areas and by the Deputy Superintendents of Police attached to the District Crime Branches in the respective districts. Such investigations may be monitored, supervised, and periodically reviewed by the supervisory officers of the respective units, under the overall supervision of the Superintendent of Police, CBCID, in the respective zones, and in the guidance of the Additional Director General of Police, CBCID, Chennai.



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14. In view of the above, this Court issues the following directions:

(i) The first and second respondents are directed to constitute a Special Investigation Team at the district level in every district of the State and necessary financial and administrative support for conducting a comprehensive investigation into fraudulent insurance claims involving fake accidents, misrepresentation of facts, forged insurance policies, fabricated injuries, and false medical reports and bills and to initiate appropriate criminal proceedings against the persons responsible.

(ii) The first and second respondents shall ensure that the Special Investigation Team is constituted in every district and functions in strict compliance with the directions issued by this Court.

(iii) The Special Investigation Team in each district shall be headed by the Deputy Superintendent of Police, District Crime Branch, in the districts, and by the Assistant Commissioner of Police, City Crime Branch, in the Commissionerates.

(iv) The functioning of the Special Investigation Team shall be monitored, supervised, and periodically reviewed



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by the concerned Superintendent of Police, District Crime Branch in the respective zones, under the overall guidance and supervision of the **Additional Director General of Police, CBCID, Chennai.**

(v) The Special Investigation Team shall have jurisdiction to receive, enquire into, and investigate complaints relating to fraudulent insurance claims, including fake motor vehicle accidents, fabricated insurance policies, false claims of injuries, forged medical records and bills, and all other connected fraudulent activities.

(vi) Whenever a request is made by the concerned insurance company in accordance with Rule 150A read with Annexure XIII, Procedure No.25 of the Central Motor Vehicles Rules, 2022 (as amended), the Special Investigation Team shall process such request in accordance with law and facilitate the collection of relevant materials, including call detail records, from the competent authorities, wherever legally permissible, within a reasonable time.

(vii) The concerned Head of the Departments shall initiate appropriate departmental disciplinary proceedings



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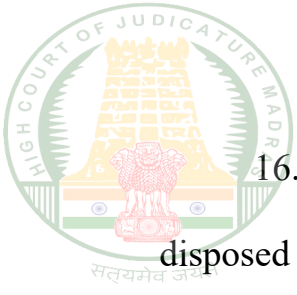


against the officials found responsible for any dereliction of duty or misconduct in facilitating or failing to prevent such fraudulent claims, without prejudice to the initiation of appropriate criminal proceedings, wherever warranted in accordance with law.

15. In so far as the representation submitted by the petitioner in respect of the eight cases as mentioned below:

S.No	MCOP	MACT	Court No.	Cr.No.	Police Station	Amount Claimed	Complaint dated
1	7298/2018	Chennai	II Judge, Court of Small Causes	585/2018	M1-Madhavaram	5000000	16.03.2021
2	5517/2019	Chennai	IV Judge, Court of Small Causes	1299/2019	T12-Poonamalle Traffic Investigation	1000000	01.10.2021
3	729/2021	Karur	Principal District Court	717/2021	Velayuthampalayam	10000000	28.02.2003
4	2258/2022	Chennai	Chief Judge, Court of Small Causes	587/2021	Omerabad	6900000	13.05.2024
5	2309/2022	Chennai	Chief Judge, Court of Small Causes	587/2021	Omerabad	4300000	13.05.2024
6	2193/2023	Chennai	Chief Judge, Court of Small Causes	675/2022	TIW-Chrompet	8705000	25.07.2024
7	535/2024	Chennai	II Judge, Court of Small Causes	663/ RH3/2023	TIW-Red Hills	8000000	06.05.2026
8	306/2024	Chidambaram	II Additional District and Sessions Judge	125/2023	Annamalai Nagar	5000000	05.06.2025

The concerned Investigating Officers in the above cases are directed to furnish the call detail records (CDRs) of the drivers of the vehicles concerned, in accordance with law, within a period of two weeks from the date of receipt of a copy of this order to the petitioner.



16. With the above directions, this Writ Petition (Criminal) stands disposed of. No costs.

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Index: Yes/No

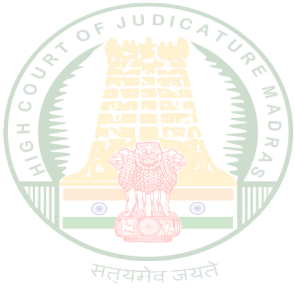
Speaking/Non-speaking order

Neutral Citation: Yes/No

Vv

To

1. The State of Tamil Nadu
Department of Home Affairs,
Fort St. George, Chennai-600 009.
2. Director General of Police
Tamil Nadu Police Headquarters,
Dr. Radhakrishnan salai, Mylapore,
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6. The State Crime Records Bureau
Additional Director General of Police,
No.95, Greenways Road,
MRC Nagar, Raja Annamalaipuram, Chennai-600028.
7. The Public Prosecutor, High Court of Madras, Chennai.



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G.K.ILANTHIRAIYAN, J.

Vv

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