Tamil Nadu Payment of Subsistence Allowance Rules, 1981

TAMILNADU India

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Rule

TAMIL-NADU-PAYMENT-OF-SUBSISTENCE-ALLOWANCE-RULES-198 of 1981

- Published on 29 December 1981
- Commenced on 29 December 1981
- [This is the version of this document from 29 December 1981.]
- [Note: The original publication document is not available and this content could not be verified.]

Tamil Nadu Payment of Subsistence Allowance Rules, 1981Published vide Notification No. G.O. Ms. No. 2838, Labour and Employment, Dated 29th December 1981 - No. SRO A-384(a)/81Notification No. G.O. Ms. No. 2838, Labour and Employment, Dated 29th December 1981 - No. SRO A-384(a)/81. - In exercise of the powers conferred by section 12 of the Tamil Nadu Payment of Subsistence Allowance Act, 1981 (Tamil Nadu Act 43 of 1981), the Governor of Tamil Nadu herby makes the following rules: -

1. Short title and extent.

(1) These rules may be called the Tamil Nadu Payment of Subsistence Allowance Rules, 1981.(2) These rules extend to the whole of the State of Tamil Nadu.

2. Definitions.

- In these rules, unless there is anything repugnant in the subject or context, -(a)"Act" means the Tamil Nadu Payment of Subsistence Allowance Act, 1981 (Tamil Nadu Act 43 of 1981);(b)"Form" means a Form appended to these rules;(c)"section" means a section of the Act;(d)Words and expressions not defined in these rules, shall have the meanings assigned to them under the Act.

3. Conditions for payment of subsistence allowance.

- The payment of subsistence allowance to an employee shall be, subject to the following conditions, namely: -(i)The subsistence allowance shall be paid either in person or by postal money order. If

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subsistence allowance is sent by postal money order, the cost of postal commission of the money order shall be borne by the employer;(ii)The subsistence allowance payable under the Act shall be paid in full, subject to the restrictions under the Act, and it shall not be liable for any deduction;(iii)The employer shall maintain a register in respect of employees placed under suspension in Form I. The signature of the employee shall be obtained for each payment of subsistence allowance. If subsistence allowance is sent by postal money order, the postal receipt shall be affixed in the register.

4. Particulars of employees placed under suspension to be furnished at the end of each half-year.

- Every employer shall send half yearly return in Form 2 so as to reach the Deputy Chief Inspector of Factories or [Inspector of Factories, Inspector of Plantations and Inspectors of Labour having jurisdiction over the area] [Substituted by the G.O. Ms. 2436, Labour and Employment, dated the 11th November 1988.] concerned not later than fifteen days from the close of the half year. Explanation. - Half-year, for the purpose of these rule, means "a period of six months commencing from the 1st January or 1st July of every year".

5. Application for recovery of money due to an employee.

(1) The application under section 4 of the Act shall be made in duplicate in Form 3 or Form 4, as the case may be.(2) The application in Form 3 or Form 4 shall be sent by registered post acknowledgment due.(3)One copy of the application in Form 3 or Form 4 shall be sent by registered post acknowledgment due to the employer by the applicant. (4)On receipt of application referred to in sub-rule (1) as early as possible, a notice in Form 5 shall be sent to the employer and the applicant calling them to appear on such date and time specified therein. The employer by himself or through his representative shall appear and furnish all information and material relevant to the question of payment of subsistence allowance to the employee. The applicant or through his representative shall appear and produce all relevant documents available with him and furnish relevant information.(5)Any person desiring to act on behalf of the applicant or employee shall present a letter of authorisation in Form 6 or Form 7, as the case may be. The letter of authorisation shall be duly signed by applicant or the employer, as the case may be, attended by two witnesses. (6) After completion of hearing on the date fixed under sub-rule (4) or after such further evidence examination of documents hearing of witnesses and enquiry, as may be deemed necessary, an order shall be passed determining the amount, if any, that is payable to the employee with a direction that it shall be paid within 30 days of the receipt of such order.] [Substituted by G.O. Ms. 572, Labour and Employment, dated the 9th November 1990.](7)If any of the parties fail to appear on the specified date of hearing after due service of notice without sufficient cause, the application shall be determined as ex-parte and orders shall be passed on, merits:Provided that an order under this sub-rule may, on good cause being shown within thirty days of the said order, be reviewed and the application reheard after giving not less than fourteen days notice to the opposite party, of the date fixed for re-hearing of the application.

6. The period for which register and forms under the rules should be preserved.

- The register and forms required to be maintained by the employer under the rules shall be preserved by him in original for a period of five years after the completion of final payment of the money due to employee under this Act.Form I(See rule 3)Register Of Employees Placed Under Suspension.Name of the establishment and postal address:Name and residential address of the employer including the Managing Agent /Managing Director in charge of day to day affairs of the establishment owned by a body corporate or Association.

Serial Number	the	me and address of e employee kept dersuspension	Monthly emoluments (Wages) paid t theemployee	Department in which the employee was workinglast an his designatio	Natu offer com date	nce Date of mitted and suspension ofoffence
(1)	(2)	1	(3)	(4)	(5)	(6)
Date of revocation suspension		Rate at which subsistence allowance calculated and period for which calculation made	Amount of subsistence allowance paid and thedate of payment	Whether the employee has been exonerated orawarded any punishment	Remarks	Signature of employee with date for receivingmoney or postal acknowledgment of money order
(7)		(8)	(9)	(10)	(11)	(12)

Form 2(See rule 4)Half Yearly Return For the Half-Year Ending on The Thirtieth Day of June, Thirty-First Day of December, 20....Name of the establishment and postal address:Name and residential address of the employer including the Managing Agent/ Managing Director incharge of day to day affairs of the establishment owned by a body corporate or Association.

Serial Number	Name and address of the employee kept undersuspension	Monthly emoluments (Wages) paid to theemployee	Department in which the employee was workinglast and his designation	Nature of offence committed and date ofoffence	Date of suspension	Date of commencement of enquiry
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Date of completi of enquir	on revocation of s		Amount of subsistence allowance pa	of final id orders	whether employe been exonera	ee has

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		period for which calculation made	payment	thecharges against employee	orawarded any punishment	
(8)	(9)	(10)	(11)	(12)	(13)	(14)

Form 3[See sub-rule (1) of rule 5]Application For Payment of Subsistence Allowance by an EmployeeToThe Deputy Chief Inspector of Factories. The Deputy Commissioner of Labour (with full postal address). Sir, I beg to apply under section 4 of the Tamil Nadu Payment of Subsistence Allowance Act, 1981 (Tamil Nadu Act 43 of 1981) for the recovery of the money due to me under the Act. The particulars relating to my claim are given in the statement below: -Statement

- 1. Name of the employee (in full):
- 2. Address of the employee (in full):
- 3. Name of the employer (in full):
- 4. Address of the employer (in full):
- 5. Department/branch/section where the employee was last employed:
- 6. Date of appointment of employee:
- 7. Post held with ticket number or serial number of the employee, if any :
- 8. Total period of service:
- 9. Amount of wages drawn by the employee immediately before suspension :
- 10. Date and cause of suspension of employee (brief history may be furnished separately with a copy of the orders of suspension.):
- 11. The period for which he is under suspension:
- 12. Whether any amount has been paid as subsistence allowance:
- 13. Amount of subsistence allowance claimed :

I declare that the particulars mentioned in the above statement are true and correct to the best of my knowledge and belief. Place: Date: Yours faithfully, Signature/thumb impression of

- 1. Name of the employee (in full):
- 2. Address of the employee (in full):
- 3. Name of the employer (in full):
- 4. Address of the employer (in full):
- 5. Department/branch/section where the employee was last employed:
- 6. Date of appointment of employee:
- 7. Post held with ticket number or serial number of the employee, if any:
- 8. Total period of service of the employee:
- 9. Amount of wages drawn by the employee immediately before suspension :
- 10. Date and cause of suspension of employee (brief history may be furnished separately with a copy of the orders of suspension):
- 11. The period for which the employee has been on suspension:
- 12. Whether any letter of authorisation has been obtained from the employee in this behalf and, if so, whether a copy application :
- 13. Relationship with the employee, if any :
- 14. In the case of legal representative, the legal authority under which the application is made may be explained with a copy of legal documents, if any.

- 2. Now, therefore, you are hereby requested to appear personally (or by a person duly authorised in this behalf) before the undesigned at....... for the purpose of answering all material questions relating to the application on the.......day of....... 20..... at....... O'clock in respect of the claim. As the day fixed for your appearance is appointed for final disposal of application, you are requested to produce on that day all the witnesses and all the relevant documents relating to the claim.
- 3. Take notice that, in default of your appearance on the day, mentioned above, the application will be examined and determined on merits.

Given under my hand and seal, this day of..... 20......Form 6[See sub-rule (5) of rule 5]Letter of Authorisation To Be Presented By a Person Desiring To Act on Behalf of The Applicant.From(Full postal address of the applicant)ToThe Deputy Chief Inspector of Factories,The Deputy Commissioner of Labour (with full postal address).Sir,I authorise Thiru/Tmt./Selvi....... for the purpose of sub-rule (5) of rule 5 of the Tamil Nadu Payment of Subsistence Allowance Rules, 1981. I furnish below the particulars in the statement below: -Statement

- 1. Name of the employee (in full):
- 2. Name of the employer (in full):
- 3. Address of the employer (in full):
- 4. Name of the person authorised (in full) :
- 5. Address of the person authorised (in full) :

- 6. Period for which authorisation is given:
- 2. I declare that I shall be bound by the acts of the person authorised in claiming money under the Act mentioned above.
- 3. I declare that the particulars mentioned in the above statement are true and correct to the best of my knowledge and belief.

Place:Date:Yours faithfully,Signature/thumb impression of applicantThe above signature/thumb-impression of the applicant is attested by:Witness 1Signature:Name:Address:Witness 2.Signature:Name:Address:Form 7[See sub-rule (5) of rule 5]Letter of Authorisation to be Presented by a Person Desiring to act on Behalf of the Employer.From(Full postal address of the employer)ToThe Deputy Chief Inspector of FactoriesThe Deputy Commissioner of Labour (with full postal address)Sir,I authorise Thiru/Tmt./Selvi.............. for the purpose of sub-rule (5) of rule 5 of the Tamil Nadu Payment of Subsistence Allowance Rules, 1981. The particulars of the claim for which this authorization is given are given in the statement below:-Statement

- 1. Name of the employee (in full):
- 2. Address of the employee (in full):
- 3. Name and address of the representative (in full):
- 4. Period for which authorisation is given:
- 2. I declare that I shall be bound by the acts of the person authorised by me as above.
- 3. I declare that the particulars mentioned in the above statement are true and correct to the best of my knowledge and belief.

Place:Date:Yours faithfully,Signature/thumb impression of employerWitness 1 Signature:Name:Address:Witness 2.Signature:Name: