

Form A

FORMAT OF EMPLOYEE / WORKMAN / WORKER

Name of Establishment: **VISHAL ENTERPRISE & VRISHAL ENGINEERING PVT LTD GROUP OF COMPANIES.**

Name of Owner: **VISHAL H. MASADA**

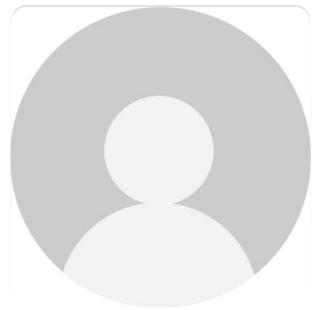
Labour Identification No: **CLRA/LICENSE/CLRA/SRT/2016 /CLL/763(243/2014)**

Name and Address of Principal Employer: **PLOT NO. D2E 345/397/398**

Labour Identification No. of Principal Employer: **--**

Gp.No / Card No: **MOLESTIAE QUI VOLUPT**

Photo:



Name: **TEST N**

Surname: **N**

Gender: **FEMALE**

Father Name: **WAYNE SANTOS**

Date of Birth: **2004-06-26**

Nationality: **PROIDENT EAQUE EUM**

Education Level: **--**

Date of Joining: **1997-06-10**

Designation: **FITTER**

Category Address: **--**

Signature/Thumb:

Type of Employment: **{ _ID: NEW OBJECTID('660660A77663E2E318685B3A'),**

NAME: 'PERMANENT' }

Mobile: **9874563210**

UAN: **SEQUI MOLESTIAE SUSC**

PAN: **EXPEDITA ET EIUSMOD**

ESIC IP: **UT ASPERNATUR OFFICI**

LWF: **--**

Aadhar No: **931236568974**

Bank A/C No.:

Bank Name:

Branch (IFSC):

Present **MOLESTIAE EAQUE QUI , AUTEM UT PERSPICIATI, EXPLICABO**

Address: **NIHIL SOL - 70**

Permanent **65 SOUTH GREEN FABIEN ROAD, NEQUE QUIS IN SINT C,**

Address: **RERUM DOLOR ALIQUIP - 86**

Service Book No.: **--**

Date of Exit: **1990-06-02**

Reason for Exit: **QUIA OFFICIA SED EIU**

Remarks:

Sign of HR

Sign of Safety Supervisor

Sign of Site In-Charge