

BUILDING AND OTHER CONSTRUCTION WORKERS (REG.)

ACT, 1926

INSPECTION REPORT

Date & Time of Inspection: 14.9.2015 @ 11:30 pm

Name & Designation of the Inspecting Officer: Palavalasa Vijaya Kumar, A.O. Palasa

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1.	Name of the Establishment Address with Phone No.s and location where building or other construction work is carried on	R.C.C. Slab roofed Building Neeladri Caddess, Plot No. 93/A, Industrial Part, Palasa		
2.	Name of the Employer and his address	Sasunapuri Pandurangarao S/o (late) Rameswararao		
3.	Address of Local Office and Names, Designation and phones Nos. of the responsible persons	Vdayapiramu Palasa		
4.	Name and permanent address of the Establishment (Owner as well as Contractor)	— do —		
5.	Nature of the building or other construction work 1. Construction of Building, 2. Factory, 3. Apartments, 4. Office Complex, 5. Hotel, 6. Other project (Pl. specify)	factory		
6.	Date of Commencement of work	09 / 2015		
7.	(a) No. of workers working in the site at the time of inspection (including those under the Contractor) (b) From other states (Name of the state)	Male 04	Female 05	Total 09
8.	Probable duration of building or other construction work and probable date of completion	11 / 2016.		
9.	Approximate total cost Construction (Enclose the list of works, if more than one work)	276.30 Lakhs. 20,78,832		

10.	Approximate cost of construction in an year from the date of commencement of construction (Rs. in lacs)	
11.	Whether Notice of Commencement of building or other construction work given as per Section 46 of the Main Act. If so, on which date and the proof of sending	Yes
12.	Whether applied for Registration of the Establishment under Section 7 of the Act, if so, the details thereof.	Yes
13.	Enclose details of Contractors, Nature of work awarded, period of work, Estimated cost of construction and App.No. of workers.	-
14.	Whether submitted Form I of Cess Rules, if so, the details thereof.	Yes
15.	Whether advance cess paid as per Rule 4(3) or 4(4) if so the details thereof	Yes
16.	Whether Registration C.L. Act/ Under Contractor Obtained ISM. Act the Licence	Yes/No. - No. Yes/No.
17.	Remarks	Ascertain information taken by the Employer.
Signature of the Employer or his Representative		Signature of the Inspecting Officer
Date :		
Details of Workers.		
Name		
Designation		

Details of Workers:		Signature of the Inspecting Officer		
Name	Designation	Working Since	Wage	Signature
(1)	(2)	(3)	(4)	(5)