GOVERNMENT OF ANDHRA PRADESH LABOUR DEPARTMENT

INSPECTION REPORT

Date

Signature of the Accompanied Officer

Time			R.C.	No.	१५ टर्ड	ريهنو	•
	Name of the Shop						
2.	Name of the Emplo Father's Name	yer & Ago	gi.	Mac	Alla.	Na	Garaja
3.	Father's Name	4	Ver	mata	Kathra		272
4.	Nature of Business	1	dies	A CONTRACT			
5.	Remarks	9					
	Fall to close the sho	p / Estt. on	Sunday / Fr	estival Holic	lay i.e. on a	41,112	Create States
Shop	is kept open at the t	ime of visit	and transa	cting busin	att densem		
/ 310	of the provisions o	APSE Act	1988	4 003	ess, contrast	ning Sec. /	(1) / 12
×	H. NagaR	Mo	929	030816	2		
Signati	ure of the Employer	/ Manager				1	
				Sign As	sature of the	Officer.	Officer