2000 Name of the Officer < SIN

Date 18 19 Resentine 17 46 pur Name Sik manahakadasha Sahar

Kiels and

Mahall

Weller,

SETTON

Name and Address of the Shop/ Establishment 1

Name, Age and Residential Address of the Employer οŽ

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- Registration No. of Shop / n
- Registration Certificate / found on No. of Employees as per the physical vertification Establishment ú
- following Registers for Inspection purpose. Whether maintained and produced the wj
 - Form-XXIII under Rule, 29(1) (a) Register of Employment in
- (b) Register of Wages in Form-XXIII under Rule 29 (2)
 - Register of Leave in Form-XXV under Rule 18 (4) 0
- (d) Register of Advances in Form -XII under Rule 18 (4)
- (e) Appointment Letter(s) in Form-XXVI under Rule 30
- Notice of weekly holiday in Form-XXIV under Rule 29 (3) 8
 - Whether Name Board of the Estt. displayed ; in Telligu or not :
 - Whether Visit Book Produced or not

produced on deed Opper Z 1000 GENERAL REMARKS: SHOP PASSINGLY Signature of the Employer Manager Transadia

Sundan

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Signature and Designation of the Inspecting Officer

**

8 RALSANAK R. Ansaid of ok Swaring Age. 30 /