GOVERNMENT OF ANDHRA PRADESH LABOUR DEPARTMENT

INSPECTION REPORT

42

Date

Place

Time

R.C. No.

1. Name of the Shop / Establishment & Address:

VVC form Scripment Pvt btd

John Dele (dowler)

Gullapelli

- 2. Name of the Employer & Age
- 3. Father's Name
- 4. Nature of Business
- 5. Remarks

Fail to close the shop / Estt. on Sunday / Festival Holiday i.e. on 126/1/16

Shop is kept open at the time of visit and transacting business, contravening Sec. 7(1) / 12

Signature of the Employer / Manager
(IBRAHIM 26/01/2016

Signature of the Inspecting Officer Assistant Labour Officer, Margata

Signature of the Accompanied Officer