BUILDING AND OTHER CONSTRUCTION WORKERS (REACS)

ACT, 1996 INSPECTION REPORT

Date & Time of Inspection	: 27	7/15	0	12/10	HITT
Name & Designation of the		The state of the s	D		h

2.	Name of the Establishment Adddress with Phone No.s and location where building or other construction work is carried on Name of the Employer and his address Office and Names, Designation and phones Nos.of the responsible persons	Vedulla Kumara silamy To (late) Lammane Rao. Ward No:13 Tilak Hagar, Kasimaga SI+2 (Constsuction of Residential Vedulla Kumara sulamy Sto (Late) Lakshmane Rao.
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)	Construction of Residential hour
	Date of Commencement of work	July /2015
	[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 Female Total
	Probable duration of building or other construction work and probable date of completion	2017
	Approximate total cost Construction (Enclose the list of works, if (note than one work)	32 19 352
	194	16,100/

TO.	Approximate	
	Approximate cost of construction an year from the dats of commencement of construction (Ris in lacs)	nt -
11.	Whether Notice of Commencemer 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	70
12.	Whether applied for Registration of the Establishment under Section 7 of the Act, if so, the deaths thereof.	- Yul
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.	Led
5.	Whether advance cess paid as per Rule 4(3) or 4(4) if so the deatils thereof	. 12) —
	Whether Registration C.L. Act/ Under Contractor Obtained ISM.Act the License	Yes/No. Yes/No.
	Remarks	
iature (of the Employer or his Representative	P. vigar kunger
e:		Signature of the Ingle tring Officer

Details of Works

Name	Designation	Westing		
[1]	[5]	Working Since [3]	Wage [4]	Signature [5]
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19	1 1			-