

BUILDING AND OTHER CONSTRUCTION WORKERS (R.E.&C.S.)

ACT, 1996

INSPECTION REPORT

Date & Time of Inspection 27/08/2015

Name & Designation of the Inspecting Officer: P. Vijaya Kumar A/c, PL

1.	Name of the Establishment Address with Phone No.s and location where building or other construction work is carried on	Construction of Residential house - Akkupelli road padmanabhapuram. G+2.		
2.	Name of the Employer and his address Cell: 9603716062	Devi prasad Tripathi S/o Tumthelwara Tripathi		
3.	Address of Local Office and Names, Designation and phones Nos. of the responsible persons	- do -		
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 house.		
6.	Date of Commencement of work	Aug/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	Female	Total
8.	Probable duration of building or other construction work and probable date of completion			
9.	Approximate total cost Construction (Enclose the list of works, if more than one work)	3728 sq ft. Approx 25,10,000 Cell: 26,100/-		

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	-
12.	Whether applied for Registration of the Establishment under Section 7 of the Act, if so, the details thereof.	- 7/11 -
13.	Enclose details of Contractors. Nature of work awarded, period of work, Estimated cost of construction and App.No.of workers.	Not applicable
14.	Whether submitted Form I of Cess Rules, if so, the details thereof.	-
15.	Whether advance cess paid as per Rule 4(3) or 4(4) if so the details thereof	-
16.	Whether Registration C.L. Act/ Under Contractor Obtained ISM.Act the Licence	Yes/No Yes/No
17.	Remarks	

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Signature of the Employer or his Representative

Date :

Signature of the Inspecting Officer

Details of Workers:

Name	Designation	Working Since	Wage	Signature
[1]	[2]	[3]	[4]	[5]