INSPECTION REPORT



Date and Time

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- Name and address of the **Establishment**
- Cell 9848344949 Name of the Employer ij,
- R.C. Number
- Nature of business
- No. of employees 5

A.P. SHOPS & ESTABLISHMENT ACT.

- Whether Form -1 (RC) displayed or not ?
- Whether Registration Certificate renewed or not
 - Labour Welfare Fund paid to:the year
 - Employment Régister in Form XXII
 - Leave Register in Form XXV
- Ack. of Appointment Letters in Form-XXVI
 - Weekly holiday list in Form XXIV Vil.
 - Visit Book VA.
- Whether name board of the Estl. is displayed in Telugu or Not. ×

MINIMUM WAGES ACT

Register in Form -X uses

Initiate Action

- la ja Ack. of wage slips in Form XI
- Abstract of Minimum Wages and Rutes in Form XII I
 - Muster Roll in Form V

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Ramadhankar Age 4044 Veed Jan H. Con 22-4-2575 8- 1.00 877 Fi Sai Mantlar Photo starles 80

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STATEMENT SHOWING THE PARTICULARS OF EMPLOYEES EMPLOYED AND WAGES PAID ETC PARTICULARS