

INSPECTION REPORT

US8
122

Date 17/11/18 Time 6 PM

V. Subramani. Asst. Labour Officer CDY

1. Name and Designation of the Authorised Officer
2. Name and Address of the Shop/ Establishment

Saravanan Press

- Chokkikulam

3. Name of the Employer

S. Saravanan, 43
RT V. Nagar

4. R.C. Number
5. Nature of business
6. Number of Employees

Partly Print

- 1 -

(i) S.P. SHOPS AND ESTABLISHMENTS ACT, 1988:

1. Whether Form-II (RC) displayed or not
2. Whether Registration Certificate renewed or not
3. Labour Welfare Fund paid or not for the year
4. Employment Register in Form-XXXI
5. Leave Register in Form-XXV
6. Ack. of Appointment letter in Form-XXVI
7. Visit Book
8. Weekly Holidays List in Form-XXIV

NO

not updated

not paid

not provided

9. Whether name board of the shop/Estt. displayed in Telugu or Not

(ii) MINIMUM WAGES ACT

1. Wage register in Form-X
2. Ack. of Pay slips in Form-XI
3. Abstract of Minimum Wages Act and Rules in Form XII
4. Attendance Register in Form-V

not provided

not updated of register

S. Saravanan

Signature of the Employer / Proprietor

Signature of the Officer