INSPECTION REPORT

45P 50

Date 28/4/15 time: 3-150

 Mame and Designation of the Authorised Officer

2. Name and Address of the Shop/ Establishment

Asst. Labour Office:

Pour thomas by Headwood anys

V Mandagoda

Name of the Employer

8985649305

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

## III A.P. SHOPS AND ESTABLISHMENTS ACT, 1988 :

- 1. Whether Form II (RC) displayed or not
- 2. Whether Registration Certificate renewed or not
- 1. Labour Welfare Fund paid or not for the year
- 4. Employment Register in Form-XXII
- 5. Leave Register in Form-XXV
- G. Ack of Appointment letter in Form XXVI
- 7. Visit Book
- E. Weekly Holldays List in Form- XX IV
- 9. Whether name board of the shop /Estt. displayed in Telugu or Not.

## (iii) 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.

## . " A . Brown

Signature of the Employer / Representative

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Signature of the Young com ALC

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