INSPECTION REPORT UNDER BUILDING AND OTHER CONSTRUCTION WORKERS (REGULATION OF EMPLOYMENT AND CONDITIONS OF SERVICES) ACT 1996

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of Inspection
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Date &
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- 2. Name / Designation of Inspecting Officer
 - Name L Address of the Establishment / construction sile
- Name (Address of the site owner with phone | os.
- Name / Address of the Office of the builder with ptr ine Nos.
- 6. Name o person present, age, father's Name with delighation, if any
- Wheth: the construction work is carried on by the: te owner himself or by Builder / Contra: or

6. (a) Max No. of Workers employed on any day (b) Tots Workers Registered

(c) Total workers Un-Registered

 Wheth: the plan approval authority approv 3 plan, if yes, details thereon

10. (a) Date of commencement of Constrction / repairs vork

(b) Date of Completion of work

- 11. Total ar a of proposed construction
 (a) Cor neccal
 (b) Res: fential
 (c) No. 1 floor
 (d) Plin Area
- 12. Total oc. 1 of construction proposed
- 13. Nature 1 activity / work of the project / site Exceve: n / Demolition / Construction / Any Other
 - Whethe registered the Establishment under Section " of the Act
- 15. If so, R. pstration Certificate No.
- 16. Whethe Form IV (Notice of Commencement / comple on of work) is submitted to the Registe ng Officer

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Male Female

Total

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when continued

- Wheth it information in Form I Submitted to the As resing efficier within 30 days of Comp. 4ton of work u/Sec. 4, rhwich, if so, it stales thereon.
- 18. Wheth it Advances to 1% as per Sec. 3 tripaid, if so, or falls thereon.
- Wheh ar the totlowing Registers and Records maint ned / produced as required Under Sec. 40.
 - (i) Relister of Muster Roll in Form No. XVI under Rute 241
- (ii) R. pister of Wages in Form No. XVII
- (iii) Pi gister of Overtime in Form No. XXII
 (iv) V heber issuing Service Certilicate to
 each worker in Form No. XXIV on termination
 of service on account of completion of work
 - 26. Who her Annual Return in Form XXV sent to the Registering Officer for the end of Cale dar Year under Sec. 57.
- 21. Whe her a Notice of Wages displayed or not
 - 22. Why her Minimum Wages paid
 - 23. Det: Is of Workers

ony Working Wages Regid. Signalute	100/ Cay 10	1	lend such "	Thomas (work 1 1		took home 1	DOSTO VALO							2000	
Name of the Worker Category	ind spins		hand in 15th Cod	They and		your topic									
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24. G neral remarks of the Inspecting Officer

V V (3x, 13x, 3xx, Signature of the Employer / Representative With name and designation

Signature of Mylinspector

Name: CL SIGLED

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