GOVT. OF ANDHRA PRADESH LABOUR DEPARTMENT

(SHOPS & ESTT)

Date: 27-4-64)

Time: 12 /\ f tv

 Name and designation of the authorised officer (Assistant Labour Officer)

- 2. Name and address of the Shops/Estt.
- 3. Date and Time of Inspection
- Name, age of the employer / Manager (designation) with father's name
- 5. Registration No of Shop / Estt.
- No. of employee as per the R.C./found on physical verification (obtain detils of workers, designation, salary, length of service etc).
- 7. Whether Appointment letters issued
- 8. Details of statutory registers maintained
 - **
 - 2.
 - 3.
 - 4.
- 9. Whether weekly off allowed to workers
- 10. Details of leaves (EV/SL/CL) allowed to workers
- Whether Labour welfare fund paid, if so, specify details
- Whether Payment of Bonus Act is applicable and details of Bonus paid
- Whether equal wages paid to women workers on par with male workers for equal work
- Maternity benefit Act.
 (No. of women availed the benefit with details)
- 15. Any other particulars
- General remarks of the inspecting officer which will include any special reports.

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Signature of the employer/ Manager / with stamp Signature of the inspector

STATEMENT SHOWING THE PARTICULARS OF THE EMPLOYEES EMPLOYED IN SHOPIE

- 35cma0	Remarks			3	·		
Signature of the	Signature of the Employee		3825	300	0903		
Wages Paid	Total	10					
	V.D.A.	6	200	8 100	0000		
	Basic	ø	7.5	ò	co.	9	
Minimum wages to be paid	Minimum wages to be paid per month		7316	96/8	3513		
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Date of Appointment Designation		10	on my Beeleing Hiller	1360	2000		
Residential		*	Total C	Punicar	\$	9	
Age		1	6	ě.	9		
Name of the Employee with Father's Name	Mame of the Employee Age with Father's Name Age Age Age Age P. Bury Jr. 37				Show the		
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Signature of the Employer / Manager of the Shop / Establishment

Signature of the Inspecting Officer and Designation Asst. Labour Officer