INSPECTION REPORT

i. Date and Time
   07-05-2015 05:10 PM

ii. Name and address of the Establishment

iii. Name of the Employer
    9849025870

iv. R.C. Number

v. Nature of business

vi. No. of employees

A.P. SHOPS & ESTABLISHMENT ACT.

i. Whether Form-I (RC) displayed or not?

ii. Whether Registration Certificate renewed or not

iii. Labour Welfare Fund paid for the year

iv. Employment Register in Form - XXII

v. Leave Register in Form - XXV

vi. Ack. of Appointment Letters in Form-XXVI

vii. Weekly holiday list in Form - XXIV

viii. Visit Book

ix. Whether name board of the Estt. is displayed in Telugu or Not.

MINIMUM WAGES ACT

i. Wage Register in Form - X

ii. Ack. of wage slips in Form XI

iii. Abstract of Minimum Wages and Rules in Form - XII

iv. Muster Roll in Form - V

Assistant Labour Officer
9H USO
<table>
<thead>
<tr>
<th>S.No</th>
<th>Name of the Employee</th>
<th>Father / Husband Name</th>
<th>Sex</th>
<th>Division</th>
<th>Designation</th>
<th>VDA</th>
<th>Elective Leave</th>
<th>Signature of Employee</th>
<th>Venc. Paid</th>
<th>Date &amp; Month</th>
<th>Signature of Chief Officer</th>
</tr>
</thead>
</table>

Statement showing the particulars of employees employed and wages paid etc. particulars.