

BUILDING AND OTHER CONSTRUCTION WORKERS (R.E.&C.S.) ACT, 1996

SKM 53

INSPECTION REPORT

Date & Time of Inspection

18/04/2015


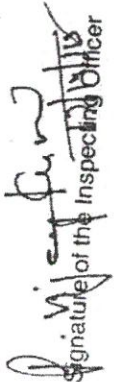
J.M.P.P. P.P.A.S

Name & Designation of the Inspecting Officer:

Construction of Residential home
Sudikonda Area
Purukulthapuram
Palasa: G+1

1.	Name of the Establishment Address with Phone No.s and location where building or other construction work is carried on	Construction of Residential home Sudikonda Area Purukulthapuram Palasa: G+1
2.	Name of the Employer and his address	Kurmapu prasade Rao Kurmapu Remya S/o. Tata Rao.
3.	Address of Local Office and Names, Designation and phones Nos. of the responsible persons	- do -
4.	Name and permanent address of the Establishment (Owner as well as Contractor)	- do -
5.	Nature of the building or other construction work 1. Construction of Building, 2. Factory, 3. Apartments, 4. Office Complex, 5. Hotel, 6. Other project (Pl. specify)	Residential.
6.	Date of Commencement of work	2015
7.	[a] No. of workers working in the site at the time of inspection (including those under the Contractor) [b] From other states (Name of the state)	Male Female Total
8.	Probable duration of building or other construction work and probable date of completion	2017.
9.	Approximate total cost Construction (Enclose the list of works, if more than one work)	G+1. 89.70 Sq.mt 89.70 Sq.mt 179.40 Sq.mt 1930.344 Sq.Ft 1351248 ✓

10.	Approximate cost of construction in an year from the date of commencement of construction (Rs.in lacs)	11
11.	Whether Notice of Commencement of building or other construction work given as per Section 46 of the Main Act. If so, on which date and the proof of sending	
12.	Whether applied for Registration of the Establishment under Section 7 of the Act, if so, the details thereof.	- Yes -
13.	Enclose details of Contractors, Nature of work awarded, period of work, Estimated cost of construction and App.No.of workers.	-
14.	Whether submitted Form I of Cess Rules, if so, the details thereof.	-
15.	Whether advance cess paid as per Rule 4(3) or 4(4) if so the details thereof	-
16.	Whether Registration C.L. Act/ Under Contractor Obtained ISM.Act the Licence	Yes/No. Yes/No.
17.	Remarks	

 Signature of the Employer or his Representative
 Date : _____
 Details of Workers: _____
 Signature of the Inspecting Officer

Name	Designation	Working Since	Wage	Signature
[1]	[2]	[3]	[4]	[5]

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W.C.P.S