

JSP
7

**GOVT. OF ANDHRA PRADESH
LABOUR DEPARTMENT
INSPECTION REPORT
(SHOPS & ESTT)**

Date: 27-4-2015

Time: 12-25 PM

- | | |
|--|---|
| 1. Name and designation of the authorised officer (Assistant Labour Officer) | : SAI MANOJ TEXTILES |
| 2. Name and address of the Shops/Estt. | : # 46-15-45/1, Dondaparthi
VISAKHAPATNAM-530016 |
| 3. Date and Time of Inspection | : TIN : 37378829497
Phone : 0891-2511488 |
| 4. Name, age of the employer / Manager (designation) with father's name | : S. Venkata Rao. 7199224886
S/o Appa Rao 8500991993 |
| 5. Registration No of Shop / Estt. | : RI |
| 6. No. of employee as per the R.C./found on physical verification (obtain details of workers, designation, salary, length of service etc). | : 2 |
| 7. Whether Appointment letters issued | : Yes |
| 8. Details of statutory registers maintained | : Registers U / ASSESSMENT
T. U. A. T. provided |
| 1. 2. 3. 4. 5. | |
| 9. Whether weekly off allowed to workers | : Yes |
| 10. Details of leaves (EV/SL/CL) allowed to workers | : Yes |
| 11. Whether Labour welfare fund paid, if so, specify details | : Not Paid |
| 12. Whether Payment of Bonus Act is applicable and details of Bonus paid | : Not Applicable |
| 13. Whether equal wages paid to women workers on par with male workers for equal work | : — |
| 14. Maternity benefit Act. (No. of women availed the benefit with details) | : — |
| 15. Any other particulars | : — |
| 16. General remarks of the inspecting officer which will include any special reports. | : — |

Signature of the employer/
Manager / with stamp

Signature of the inspector
A. C. E. V. P.

STATEMENT SHOWING THE PARTICULARS OF THE EMPLOYEES EMPLOYED IN SHOP/ESTABLISHMENT

Sl. No.	Name of the Employee with Father's Name	Age	Residential Address	Date of Appointment	Designation	Minimum wages to be paid per month	Wages Paid			Signature of the Employee	Remarks
							Basic	V.D.A.	Total		
1		3	4	5	6	7	8	9	10	11	12
1	B. Tulasi D/o Shiva	18	M. K. Chitambar Bale	6/1/2018	Helper	7316	7000			B. Tulasi	

Signature of the Employer / Manager
of the Shop / Establishment

Signature of the Inspecting Officer and Designation
Asst. Labour Officer - IV