INSPECTION REPORT

1. Name and designation of the authorised Officer

Name and address of the Shop/Estt

970 4481250

Date of previous Inspection

- Name, age of the Employer/Manager (designation) with father's name
- Registration No. of Shop/Estt.
- No. of employees as per the R.C./found on Physical verification (obtained details of workers, designation, salary, length of service etc.)
- 7. Whether appointment letters issued
- Details of Statutory Registers produced under
- 9. Whether weekly off allowed to workers
- 10. Details of leaves (EL/SL/CL) allowed to workers
- 11. Whether labour welfare fund paid, If so, specify details
- 12. Whether payment of Bonus Act is applicable and details of Bonus paid
- 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

Read over and explained in Telugu/English.

Name Board displayed in Telign.

& G. Ram Lase Signature of the Employer Manager / with stamp G. Rambal

Date : 29 7 15

Time : 12:4391 T. Sujalla fice, postavaleca Lamakeishna Seat coverwhi

Vizianagui nd KoHavalan

Gurdi Rambabri 26.45 8/0 A. Ramunadu Not regulis undu APSGQ

ril