

CONSOLIDATED ANNUAL RETURN

This form is in lieu of the returns required to be filled under following
Labour Laws

Period From Date :

1. The Minimum Wages Act 1948
2. The Payment of Bonus Act 1965
3. The Payment of Wages Act 1938
4. The Contract Labour (R & A) Act 1970
5. The Factories Act 1948
6. The Maternity Benefits Act 1961

1. Name and Postal address
of the establishment / Factory

2. Name and residential address of the
Employer / Occupier / Contractor
:

3. Name and residential address
of the manager or person
responsible for supervisor or
control of the establishment / Factory

4. Date of commencement of
the establishment / Factory

5. Nature of Industries / Activity

6. Number of employees employed
:
(including contract workers)

Type of Worker	Unskilled	Semi Skilled	Skilled	Male	Female	Total
Direct						
Through Contractor						
Total						

7. Maximum no. of employees employed
on any day during the year under report :
(including contract workers)

Type of Worker	Unskilled	Semi Skilled	Skilled	Male	Female	Total
Direct						
Through Contractor						
Total						

PART A:

The Part A is to be furnished if the maximum numbers of employees employed on any day during the year under report do not exceed 9 (Nine).

*	Number of days the establishment / Factory worked in the		
*	Number of man days worked in the year		
*	Number of averages employees employed in the year		
*	Actual wages paid category wise	Male	
		Female	
*	Total cash value of wages paid in kind		--NIL--
*	Total emoluments paid in the year	Rs.	
*	Total fine imposed ; if any		--NIL--
*	Other deductions; if any	Rs.	

PART B:

The Part A and Part B are to be furnished if the maximum number of employees employed on any day during the year under report exceed 9 (Nine)

*	Amount of bonus paid	Rs.	0.00
*	Percentage of bonus paid		0.00%
*	Number of Beneficiaries		0
*	If bonus is not paid , reason there of		

PART C:

Part A,B & C are to be furnished , if the establishment has employed more than 9 contract labour on any day during the year under report (Details to be provided by the principal Employer)

- * Name and postal address of the contractor
- * Nature of work / operations of contractor
- * Total number of days during the year on which contract labour was employed
- * Total number of man days worked during the year by contract labour
- * Total number of days during the year on which direct labour was employed
- * Total number of man days worked by direct labour
- * Change if any in the management of establishment, its location , or any other particulars furnished to the Registering Officer in the application for the registration (Details may be furnished with dates of changes)

Note :- In case the number of contractors are more the details of each Contractor may be furnished in same columns in separate sheet.

PART D:

Part A,B & D is to be furnished by the factory registered under The Factories Act,1948
employing less than 250 employees.

- * Licence and Registration number of the factory
- * Section of the Act under which the factory is covered
 - (a) 2(m)(i).....
 - (b) 2(m)(ii).....
 - (c) 85.....
- * Section of industry
 - (a) Public Sector....
 - (b) Joint Sector.....
 - (c) Govt. Sector....
 - (d) Private Sector....
- * Details of factory, if it carries Hazardous and dangerous process
- * Details of factory,if it carries hazardous Operations as define under section 2(cb) and 87
- * Details of health and safety policy to be furnished by factories defined under section 2(cb)
 - (a) 2(m)(i).....
 - (b) 2(m)(ii).....
- * Details of medical facilities to be furnished by factories registered under Section 2(cb) and Section 87
 - Number of Factory Medical Officer
 - Occupational Health Center
- * Details of facilities provided for
 - (a) Shelter or rest room Yes/ No
 - (b) Lunch room Yes/ No
- * The factory employing 30 or more female employees has provided creche room with facility
Yes/ No
- * Number if Dangerous occurrence during the year
.....
- * Accident details
 - Number of Fatal Accident.....
 - Number of Non Fatal Accident.....
 - Man days lost
- * Number of workers entitle for leave with wages during the year
- * Amount of leave with wages paid **0.00**
- * Average Number of female workers employed in the year
- * Number of female workers applied for benefit of medical bonus and amount paid
Number.....
Rs.

PART E:

Part A,B,D and E are to be furnished by the occupier employing more than 250 employees

* Details of canteen facilities provided	Yes / No] N.A.
* Details of safety committee formed	Yes / No	
* Details of appointment of Welfare officers,	Yes / No	
* Details of appointment of Safely Officer.	Yes / No	
* Details of factory Medical Officer appointed	Yes / No	
* Details of Ambulance room / Occupational Health center facilities and staff	Yes / No	
. N.B.: Details of additional facilities , if provided may be mentioned in separate sheet	Yes / No	

PART F:

Part A and F are to be furnished **HALFYEARLY** by the Contractors employing more than 9 workers.

* Duration of contract Number of employees worked during the half year				
* Average number of contract labour worked on any day during the half year.			.00	
* Details of				
	(a) Working hours		8 Hours / week	
	(b) Over timework		NIL	
	(c) Weekly holidays		THURSDAY/SUNDAY/TUESDAY	
	(d) Spread over		N.A.	
	(e) Weekly holiday paid or not.		NO.	
* Number of man days worked during the half year.		Male	Female	Total
* Amount of Wages paid				
* Amount of deduction from wages				
* The following has been provided ?				
	* Canteen	Yes / No		
	* Rest rooms	Yes / No		
	* Drinking water	Yes		
	* Creches	No		
	* First aid	Yes		
				We maintain First Aid box, scissor,Medicated bandage,cotton,dettol silver arc tube for burn,soframycir , metacine , laryago , disprine tablets eye drops .