



**Form फार्म XIII**  
[See Rule नियम 13 देखें]

**REGISTER OF WORKMAN EMPLOYED BY CONTRACTOR**

उद्देश्य का नाम व पता  
Name and Address of Contractor Talkari Corp of Buses City  
कार्य का प्रकार व कार्यस्थल  
Nature and Location of Work Auto Heavy Carriage Noida UP  
स्थापन का नाम व पता जिसमें/द्वारा निरीक्षण में अनुबंध-कार्य हो रहा है  
Name and Address of Establishment in/under which Contract is carried on US MWD WTP Korchi  
मूल नियोजक का नाम व पता  
Name and Address of Principal Employer Delhi Jal Board RAW

**ठेकेदार द्वारा नियुक्त कर्मचारियों का रजिस्टर**

A Product from  
Ministry of Labour & Employment, Government of India  
Customer Care: 011-26101101, 26101102, 26101103, 26101104, 26101105, 26101106, 26101107, 26101108, 26101109, 26101110, 26101111, 26101112, 26101113, 26101114, 26101115, 26101116, 26101117, 26101118, 26101119, 26101120, 26101121, 26101122, 26101123, 26101124, 26101125, 26101126, 26101127, 26101128, 26101129, 26101130, 26101131, 26101132, 26101133, 26101134, 26101135, 26101136, 26101137, 26101138, 26101139, 26101140, 26101141, 26101142, 26101143, 26101144, 26101145, 26101146, 26101147, 26101148, 26101149, 26101150, 26101151, 26101152, 26101153, 26101154, 26101155, 26101156, 26101157, 26101158, 26101159, 26101160, 26101161, 26101162, 26101163, 26101164, 26101165, 26101166, 26101167, 26101168, 26101169, 26101170, 26101171, 26101172, 26101173, 26101174, 26101175, 26101176, 26101177, 26101178, 26101179, 26101180, 26101181, 26101182, 26101183, 26101184, 26101185, 26101186, 26101187, 26101188, 26101189, 26101190, 26101191, 26101192, 26101193, 26101194, 26101195, 26101196, 26101197, 26101198, 26101199, 26101200

क्रमांक Sl. No.	कर्मचारी का नाम व उपनाम Name and Surname of Workman	आयु व लिंग Age and Sex	पिता/माता/पति का नाम Father's/Mother's/Husband's Name	नियुक्ति का प्रकार/प्रकार Nature of employment/Designation	कर्मचारी का स्थायी पता (जिसमें गाँव/ग्रामीण/तहसील व जिला) Permanent home address of Workman (Village and Tehsil/Taluk and District)	स्थानीय पता Local Address	कार्यारंभ तिथि Date of Commencement of Employment	कर्मचारी के हस्ताक्षर या मुद्रा Signature or Thumb-impres-sion of Workman	कार्यरंभ तिथि Date of Termination of Employment	रद्द कारणा Reasons for Termination	टिप्पणी Remarks
1	Krishankul	28	Mange Ram	सिस्टीम Buy Plant Operator		US MWD WTP Korchi	11/1/18				
2	Pankaj Kumar	32	Suresh	OFFICE Boy		"	7/9/19				
3	Purmod Kumar	33	Devi Singh	Subervisor		"	13/6/22				
4	Manoj Chauhan	28	Raj Kumar	Cook		"	17/7/19				
5	Puram Singh	46	Ramesh			"	14/5/24				
6	Hemish Kumar	27	Bhagat Singh	Operator		"	11/9/24				



Name & Address of the Contractor

T. V. Singh & Co. Pvt. Ltd.  
 45, Haryana Conf. Bldg, Market of  
 45, Anand Bazar, P. Kirti, Delhi  
 Delhi, Jai Board, Delhi

**FORM XVII**  
 (SEE RULE (78))  
**REGISTER OF WAGES**

**FORM XVII**  
 (2) (a)  
**WAGES**

Name & Address of Establishment/under \_\_\_\_\_

In which contract is carried on \_\_\_\_\_

Name and address of the principal Employer \_\_\_\_\_

Name & Location of Work \_\_\_\_\_

WAGE PERIOD MONTHLY FOR THE MONTH OF \_\_\_\_\_



Serial No.	Name of Workman	Father's Name	Designation Nature of work	No. of days Worked				Daily rates of wages/price Rate or wages	Total Salary Payable	HRS	Over time Amount	DEDUCTIONS				Total Deductions	Total Amount Paid	Signature or thumb impression of workman	Initial of contractor or his representative		
				Working days	Leave EA	Leave CL	Holidays					Other days	Advance	Total P.F.	ESI 1.75%						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15							
1	Krishomlal	Mange Ram	Assistant Boy	25				675	16825						2145	14680					
2	Rakesh Kumar	Suresh	Plant operator	25				816	20400						2601	17799					
3	Manoj Chaudhary	Raj Kumar	Supervisor	25				675	16825						2145	14680					
4	Premod Kumar	Devi Singh	Officer Boy	25				675	16825						2145	14680					
5	Puran Singh	Ramesh Ram	COOK	25				816	20400						2601	17799					
6	Harish Kumar	Bhagat Singh		25				816	20400						2601	17799					
												Total Working days =		250 days							
												Total wages		= 111675/-							
												Total S.I., P.F.		= 152101/-							
												Net Paid		= 97463/-							





### Employee's Accident (Regulation) Form

Name of The Factory Talukhi Sugar & Distillery  
Aty, Hary, Condel, Noida UP

Sl. No.	Date of Notice	Time of Notice	Name & Address of the injured person	Sex	Age	Insurance Number	Shift, Department and occupation of the employee	INJURY		
								Cause	Nature	Date

①			Nil					Accident to All employees on			
②			Nil					Accident to All employees on			
③			Nil					Accident to All employees			
④			Nil					Accident to All employees			
⑤			Nil					Accident to All employees			

### State Insurance Book (66) 11

Time	Place	INJURY		Signature & designation of the persons who makes the entry in Accident Book	Name, address and occupation of two witnesses	Remarks, if any
		What exactly was the injured person doing at the time of Accident	Name, occupation, address & signature or the thumb impression of the person(s) giving notice			
		on	month	of	May-2011	
		on	month	of	June-2011	
		on	the	month	of July-2011	
		on	the	month	of Aug-2011	
		on	the	month	of Sep-2011	

**KALKA STATIONERS**  
 G-11, Sahay Building  
 58, Nehru Place, N.D.-19  
 Ph. 26430912, 26389845

Contract Labour (Reg. & Abo.) Central Rule, 1971

**Register of**

Name and Address of Contractor: TALKING EXP. & JUDGE CO.  
Amr Singh Chakraborty, Noida, UP

Nature and location of work				
Serial No.	Name of workman	Father's/Husband's Name	Nature of employment/Designation	Wages period and wages payable
1	2	3	4	5
1	Nil	Advances	to All Employees	
2	Nil	Advances	to All Employees	
3	Nil	Advances	to All Employees	
4	Nil	Advances	to All Employees	

**FORM XXII**  
 [See Rule 78(1)(a)(ii)]

**ADVANCE**

Name & Address of estt. in/under which contract is carried on: Pt. J. S. D. Noida

Name & Address of Principal Employer					
Date and amount of advance given	Purpose(s) for which advance made	No. of instalment by which advance to be repaid	No. of instalment of each instalment repaid	Date on which last instalment was repaid	Remarks
6	7	8	9	10	11
On 1st month of June-2024					
On the month of July-2024					
On the month of Aug-2024					
On 1st month of Sep-2024					

KALKASTATIONERS  
G-11, Sahyog Building  
28, Nehru Place, N.D.-19  
Ph: 26449902, 26289645

Contract Labour (Reg. & Abo.) Central Rule, 1971

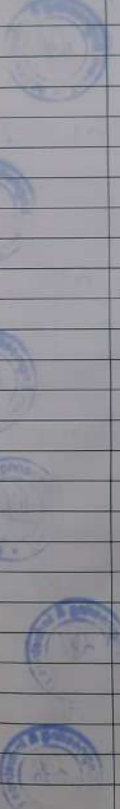
## Register of Deductions

Name and Address of Contractor Talwar Cement & Industries Ltd.  
Ans. Harvy Complex N.D. 19

Nature and location of work 48 MOD NEW TR 'Kardhi' Delhi

Serial No.	Name of workman	Father's/Husband's Name	Designation/ Nature of Employment	Particulars of damage or loss	Date of Damage or loss
1	2	3	4	5	6

1	Min	Deduction Ans	Damage or	Losses	
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FORM XX  
[See Rule 78(1)(a)(ii)]

## for Damage or Loss

Name & Address of estt. in/under which contract is carried on Delhi JCL Board Delhi

Name & Address of Principal Employer

Whether workman showed cause against deduction	Name of person in whose presence employee's explanation was heard	Amount of deductions imposed	No. of instalments	Date of recovery		Remarks
				First instalment	Last instalment	
7	8	9	10	11	12	13

					Feb 2024	
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**KALKA & CO.**  
G-7A, Sarayog Bldg. 58,  
Nehru Place, New Delhi-19  
Ph. 2621917, 9811609050

### REGISTER OF

### FINES

**FORM XXI**  
(See Rule 78(1)(a)(ii))

Name and Address of Contractor: Toivani, Sanyal & Brothers Pvt  
Nature and location of work: Atm Room, Sanyal, Noida

Name & Address of establishment in under which contract is carried on: \_\_\_\_\_  
Name and Address of Principal Employer: Dr. Jai Prakash

Sl. No.	Name of Workman	Father's/Husband's Name	Designation nature of Employment	Act/Omission for which fine imposed	Date of Offence
1	2	3	4	5	6
①	Nil	Nil	All	Employer	
②	Nil	Nil	All	Employer	

Whether workman showed cause against fine	Name of Person in Whose presence employee's explanation was heard	Wages period and wages payable	Amount of fine imposed	Date on which fine realised	Remarks
7	8	9	10	11	12
	For the matter			Aug-2014	
	For the matter			Sept-2014	

KALKA STATIONERS  
G-11, Sahyag Building  
SI, Nehru Place, N.D. 110  
Ph. 2448992, 2439845

Contract Labour (Reg. & Abo.) Central Rule, 1971

Register of

OVERTIME

Name and Address of Contractor: TFL/Ami Energy & Trading Co  
Ami Housing Complex, Noida U.P.

Name & Address of estt. in/under which contract is carried on: Delhi Jai Board

Nature and location of work

Name & Address of Principal Employer

Serial No.	Name of workman	Father's/Husband's Name	Sex	Designation/ Nature of Employment	Date on which overtime worked	Total overtime worked or production in case of piece-rated	Normal rates of wages	Overtime rate of wages	Overtime earning	Date of which overtime wages paid	Remarks
1	2	3	4	5	6	7	8	9	10	11	12
①	Nil	over time to All Employees	For		the month of					May-2024	
②	Nil	over time to All Employees	For		the month of					June-2024	
③	Nil	overtime to All Employees	For		the month of					July-2024	
④	Nil	overtime to All Employees	For the		month of					Aug-2024	
⑤	Nil	overtime to All Employees	for the		month of					Sep-2024	



# REGISTER OF LEAVE

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Sold by **KALKA STATIONERS**  
G-11, Sahyog Building  
58, Nehru Place, N.D.-19  
Ph.: 26449902, 26289845

FORM I (See Rule 14)





The Delhi Shops & Establishments Rules, 1954

Name of Establishment :

Name of Employee :

Tajendra <sup>^</sup> Chandra S. Singh

Date of Employment

Amount of Leave Requested	Date of Application if any	Casual or Sickness Leave			Total Leave Availed	Date of Application	Whether Application Granted or Refused fully or partly	Privilege Leave		Total	Balance at the end of the year
		Leave Availed		Leave Availed							
		From	To	From				To			
		Nil						All Employees			
								for			
		the month of May 2024									
											
		Nil						All Employees			
								for			
		the month of June 2024									
											
		Nil						All employees			
								on			
		the month of July 2024									
											
		Nil						All Employees			
								for			
		the month of Aug 2024									
											
		Nil						All Employees			
								for			
		the month of Sep 2024									
