

D. Details of Contractors:-

Sl. No	Name, Father's/ Husband's Name, Date of Birth and Aadhar number of the Contractor	Address, Email ID, Telephone number with STD code and Mobile number of Contractor	Nature of Work	Maximum No. of Contract labour engaged	Date of Commencement / Probable date of Completion of work	No. of Inter-state migrant workmen engaged
(1)	(2)	(3)	(4)	(5)	(6)	(7)

E. Details of payment of fees:-

1. Fees in rupees:
2. Transaction number:
3. Date of payment:
4. Name of the bank:

F. Other Details:-

Dated:-

Signature/ E-sign/digital
sign of employer

Place:-

FORM II

[see rule 5]

NOTICE OF COMMENCEMENT / CESSATION OF ESTABLISHMENT:

1. Registration No:
2. Name and Address of Establishment:
3. Name and Designation of employer who has ultimate control over the affairs of the establishment:
4. Full address to which communication relating to the establishment to be sent:
5. Nature of work of the establishment:
6. In case of the notice is for commencement of work the approximate duration of work:
7. In case of cessation, the date of cessation:

I/We hereby intimate that the work of establishment having registration No.

.....dated is likely to

Commence/cessation is likely to be completed with effect from

.....(Date)/On (Date)

In case of cessation of work:

I/we hereby certify that the payment of all dues to the workers employed in the establishment has been made and the premises are kept free from storage of hazardous chemicals and substances.

Signature of the Employer

To,

The Inspector-cum-Facilitator