The Tamil Nadu Factories Rules FORM 22

(Prescribed under sub-rule (2) of rule 100)

Coi	Combined Annual Return for the year ending 31st December			
	Regis	tration Number of t	he Facto	ry:
1	Name and address of the Factory			
1.	Name and address of the Factory			
	Address:	Telephone	Fax	E.Mail

2. Name and Addresses of the Occupier and Manager:

Name	Designation	Email	Telephon e	Mobile
	Occupier		(O)	
			(R)	
	Manager		(O)	
			(R)	

- 3. Nature/ Type of Industry:
- 4. Particulars of Products Manufactured/ Services Rendered:

	Name of the Product/ Services	Capacity (in relevant terms)	Quantity Manufactur ed (in relevant terms)	Value (in Indian Rupees)
(i)				
(ii)				
(iii)				
(iv)				
(v)				

- 5. (a) Does the factory carry out,--
- (i) any process or operation declared dangerous under section 87 of the Factories Act, 1948.
- (ii) Any Hazardous Process under section 2(cb) of the Factories Act, 1948?
- (b). Name of the dangerous processes or operations/ hazardous process carried on/ average number of persons employed daily in each of the processes or operations.
- 6. (a). Particulars of Employment:

Number of Persons on Roll as on 1.1.200.	Number of Persons on Roll as on 31.12.2 00.	Numb er of Days Factor y worke d	Number of Manday s worked during the year	Number of Man hours worked during the year		Averag e Numb er of hours worke d per week	Total amount of Salary/ wages paid including allowance s	
				Nor mal	O T	T ot al		
Men	Men							
Wom en	Wom en							
Adole scent men	Adole scent men							
Adole scent wome n	Adole scent wome n							
Total	Total							

(b'). Average	Number	of Persor	ns emplo	ved during	the '	vear:-

N/I	Δr	٠	
IVI	CI	ı	

Women:

Adolescent men:

Adolescent women:

Total

7. Particulars of Earned Leave with Wages:

	Total Number of persons employed	Number of employees eligible for earned leave	Number of employees availed/ granted earned leave	Number of employees discharged / dismissed/ Terminate d/ resigned/ retired/ died during the year	Number of employees paid wages/ salary in lieu of earned leave
Men					
Women					
Adolesc ents					
Total					

8. (a) Safety Officers, Welfare Officers and Medical Officers

	Number of Officers required to be appointed	Actually appointed	If not appointed reasons
(i)	Safety Officers		
(ii)	Welfare Officers		
(iii)	Medical Officers		

(b) Whether the following Welfare Measures are provided?

(i) Ambulance Room as per sub-section (4) of section 45 of the Factories Act, 1948	YES/NO
(ii) Canteen as per sub-section (1) of section 46 of the Factories Act, 1948	YES/NO
(iii) Whether the Canteen is run directly by the management or through Contractor or Common canteen?	Directly by the management/ Contractor/Com mon Canteen
(iv) The nature of provision of Creche such as separate/ common of the group/ common of the Employers Association as per sub-section (1) of section 48 of the Factories Act, 1948?	YES/NO
(v) Shelter, Rest Rooms and Lunch Rooms as per sub-section (1) of section 47 of the Factories Act, 1948?	YES/NO
(vi) Occupational Health Centre as per rule 62-0	YES/NO

- 9. Particulars of Accidents, Man days Lost and others:
- (i) Total number of fatal/ non-fatal accidents taken place in the year:
- (ii) Number of employees involved in such fatal/ Non-fatal accidents:
- (iii) Total number of mandays lost in such accidents
- (iv) Number of employees who returned to work after 48 hours of the accidents and before 21 days of such accident:
- (v) Number of employees returned to work after 21 days of such accidents:
- without permanent/ partial/ total disablement
- with permanent/ partial/ total disablement

10. (i) Particulars of Maternity Benefits:

	Number of Employees received	Total amount paid
Miscarriage		
Confinement		
Illness		
Medical Bonus		
Total		

(ii)	Number of women who gave notice under section 6 of the Maternity Benefit Act, 1961.	
(iii)	Number of women who were granted permission to absent on receipt of notice of	

	confinement		
(iv)	Claims for maternity benefit rejected	Number	Amount not paid
(v)	Claims for medical bonus rejected:	Number	Amount not paid
(vi)	Cases in which leave for miscarriage was applied for but was rejected:	Number	Amount not paid
(vii)	Cases in which additional leave for illness under section 10 was applied for but was rejected:	Number	Amount not paid
(viii)	Cases in which payment was made to persons other the woman concerned:	Number	Amount paid
(ix)	Women deprived of maternity benefit and/ or medical bonus under proviso to sub-section (2) of section 12 of the Maternity Benefit Act, 1961.	Number	Amount not paid
(x)	Cases in which payment was made on the order of the Appellate Authority or Inspector	Number	Amount paid
(xi)	Number of cases where prenatal confinement and postnatal care was provided by the management free of charge under section 8 of the Maternity Benefit Act, 1961.		,

11.(i) Particulars of Deductions made from Salary $\,$ (in respect of persons whose wages are less than $\,$ Rs.1,600/- per month)

	Number of employees involved	Total Amount of deductions made
Fines		
Damages/ Loss		
Breach of Contract		
Others		
Total		

(ii) Details of number of persons earning less than Rs.1,600/- per months	:-
Men	

Women:

Adolescent:

(iii) Details of money value concession paid (in Rupees):

(iv) Total wages including deductions Under sub-section (2) of section 7 of the Payment of Wages Act, 1936:

Ba sic Wa ge	Dearne ss Allowan ces	Over time	Non Profit sharing bonus	Othe r allo wan ces in cash	Arrears of pay in respect of previous year paid during the year	Tota I

(v) Details of the remittances of Fines collected towards Tamil Nadu Labour Welfare Fund.

	D.D.No.	Date	Bank	Amount Rs.ps.
1 st Quarter				
2 nd Quarter				
3 rd Quarter				
4 th Quarter				

- (vi) Total cash value of the wages paid in kind:
- 12. payment of Bonus paid for the accounting year:

Number of employees eligible for Bonus	Percentage of Bonus declared	Total amount of Bonus paid	Date of payment

13. Contract Labour

Names and address es of contract ors	Period of contract	Nature of work	Number of days worked	Number of manday s worked	Maximu m number of workers employe d by each contract or

Signature of the Manager

Date: Place: