

FORM No. 35

[See rule 136 (b)]

HALF YEARLY RETURNS

For the half year ending June 20.....

(This return should be sent to the prescribed authority latest by 15th July of current year)

Registration No. _____

Licence No. _____

NIC Code No. _____
(as given in the licence)

1. Name of factory :
2. Name of occupier :
3. Name of manager :
4. District :
5. Full postal address of the factory
(including PIN CODE) :
6. Industry :
 - a) Nature of industry
(See Explanatory note – 1) :
 - b) Section of the Act under
which the factory is
covered (please tick (ii)
the appropriate box) : 2m(i)
2m(ii)
Section 85
 - c) Sector of industry : Public sector
(Please tick (ii)
appropriate box) Cooperative sector
(See Explanatory
note 2) Joint sector
 Private sector
7. Number of days factory worked during the
half year ending 30th June, 19.... (See
explanatory note 3) :
8. Number of mandays worked (i.e aggregated
attendance) during the half year ending 30th
June, 20 (See Explanatory note 4) :

- | | | |
|----------------|-------------|---|
| a) Adults | (i) Male | : |
| | (ii) Female | : |
| b) Adolescents | (i) Male | : |
| | (ii) Female | : |
| c) Children | (I) Male | : |
| | (ii) Female | : |
| | Total | : |

9. Average number of workers employed (daily) i.e. item 8 divided by item 7 (See explanatory note 5) :

- | | | |
|----------------|-------------|---|
| (a) Adults | (i) Male | : |
| | (ii) Female | : |
| (b) Adolescent | (i) Male | : |
| | (ii) Female | : |
| (c) Children | (i) Male | : |
| | (ii) Female | : |
| | Total | : |

10. Medical information

- | | |
|---|---|
| (a) Total number of workers employed in hazardous process | : |
| (b) Name of hazardous process | : |
| (c) Number of Medical Officer employed | : |
| (i) Full time | : |
| (ii) Part-time | : |
| (d) Number of workers examined by factory Medical Officer | : |
| (i) Worker working in hazardous process | : |
| (ii) Others | : |

Signature of Manager
Name (in block letters)

Date :-