

# The Maharashtra Factories Rules

**FORM 30**  
(See rule 123)

## Register of Accidents and Dangerous Occurrences

Name of injured person (if any)	Date of accident or dangerous occurrence	Date of Report (or Form 24) to Inspector	Nature of accident or dangerous occurrence	Date of return of injured person to work	Number of days injured person was absent from work
1	2	3	4	5	6