
FORM A

[See Rule 3(1)]

Statement under section 6(2)

1. Name of the establishment, if any (in block letters)
2. Full postal address and location of the establishment
3. Situation of office, store-room, godown, warehouse or work place, if any, attached to the establishment but situated in premises different from those of the establishment
4. Category of the establishment, i.e. whether (a) shop; (b) commercial establishment, (c) residential hotel, restaurant or eating-house, (d) theatre or other place of public amusement or entertainment
5. Particulars of persons having interest in the establishment as employer (Applicable only when a nomination is made under section 55)

S. No.	Name and parentage	Designation	Permanent Address	Nature of interest (whether Partner/ Manager/Director/ Shareholder)
1	2	3	4	5

6. Nature of business
7. Name, designation and permanent address of the employer (manager, agent or any other person) who is in the immediate charge of the general management or control of the establishment
8. Particulars of members of employer's family employed in the establishment as defined in section 2(17)

Name Age Sex Relationship
with employer

1.
2.
3.

9. Name of other persons occupying positions
of management or employees engaged in
confidential capacity, if any.

1.
2.

10. Number of employees Male Female Total

1. Adults
2. Young persons

Total _____

11. Name the day of the week on which
weekly holiday will be observed (in case
of shops Commercial Establishments only)

12. Details of remittance (enclose copy of
challan obtained from Treasury)

Name of treasury	Challan No. and date	Amount of fee paid
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Place Date

Signature of Proprietor/
Partner/Manager/Secretary/
Managing Director or a
person in charge.
