| FORM REGU | XI LATION | 66 | | | | | | | | | |
|-----------------|---------------------------|---------------|--|---|--------------------|---|---|--|--------------------------------------|--------------------------------------|----------|
| | | | | Register of | ACCIDENT | Г | | | | | |
| Employer's code | | | 1 | 1100812510001000 | | | | | | | |
| Name | | Iress of Co | ontractor: Elit | e Facilities | And Systen | ns Pvt Ltd | | T | T | 1 | |
| S.no | Name of workm en | Father's name | Desination/ Nature of Employmen t | Act/Omissi on for which fine Imposed | Date of Offence | Whether workmen showed cause against fine | Nature of person in whose presence employee's explanation was heard | Wages period and wages payable | amoun t of fine impos ed | Date on which fine realised | Remarks |
| | | | | | | | | | | | |
| | | | No ACC | DENT T | ILL DATE | IN THE N | MONTH OF MAF | R-2023 | | <u> </u> | <u> </u> |
| | | | | | | | | | | | 1 |