11

ACCIDENT BOOK

[Regulation - 66]

(Employee's State Insurance Corporation)

[see Rule 78 (1) (a) (III)]

Name and address Of Contractor: SNOWHILL RAINBOW PVT .LTD N-304 MANGOL PURI -110083

Name & Address of Establishment In/Under which Contract carried on: C&W PMSI PVT.LTD JA -1120-1121 - 11TH FLOWER DISTT. CENTER JASOLA NEW DE

Nature and Location of work :horticulture services At DLF Prime Tower, Okhla, New Delhi

Name & address of Principal Employer: C&W PMSI PVT.LTD JA -1120-1121 - 11TH FLOWER DISTT. CENTER JASOLA NEW DELHI -110025

SI.				Sex	Age	Insura	Shift,	INJURY						Name,	Signature	Name,	Remarks
No.						nce No	Department &	Date	Time	Place	Cause of	Nature	What exactly	Occupation,	&	address &	if any
			the				Occupation of				injury	of injury	was the injured	address &	designatio	occupation	
			of t				the Employee						person doing at	sign. or the	n of the	of two	
			SS										the time of	thump	person	witnesses	
	93	Notice	k Address person										injury	impression of			
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	Z	of N	. 0											giving notice	entry		
	0	6 O	ne rec														
	Date of Notice	Time	Name & injured														
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					The	re is no	accident in the	e mor	ith of C								
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