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 DEL

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		Shift,	INJURY						Name,	Signature	Name,	Remarks
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	
													the time of	thump	person	witnesses	
	ė	e c	re.			0							injury	impression of	who		
	Notice	Notice	Address			Š								the person	makes the		
	Ž					92								giving notice	entry		
	ð	e of	e d			<u>ra</u>											
	Date	Time	Name & injured			Insuran											
-		-	Z .			<u> </u>											
		-															
	1		The	ere is r	no acc	ident re	eported at this	site fo									
				ı	1	ı	1		ı								
							1										

