**FORM -11**

[Regulation - 66]

# ACCIDENT BOOK

*(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 DELHI -110025

**Nature and Location of work** :horticulture services At DLF Tower Jasola Tower A&B

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

| Sl. No. | Date of Notice | Time of Notice | Name & Address of the injured person | Sex | Age | Insurance No | Shift, Department & Occupation of the Employee | INJURY | | | | | | Name, Occupation, address & sign. or the thump impression of the person giving notice | Signature & designation of the person who makes the entry | Name, address & occupation of two witnesses | Remarks if any |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | Date | Time | Place | Cause of injury | Nature of injury | What exactly was the injured person doing at the time of injury | | | | |
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**No accident reported at this site for the month of Aug-2022**

SNOWHILL RAINBOW PVT. LTD. New Delhi