

In pursuance of clause (3) of Article 348 of the Constitution of India, the following translation in English of the Government Notification, Industries, Energy & Labour Department No. BSE-2009/C.R.122/Lab-10, dated 03/01/2012 is hereby published under the authority of the Governor.

By order and in the name of the Governor of Maharashtra

(Dr. Kavita Gupta)  
Principal Secretary to Government

## NOTIFICATION

Industries, Energy and Labour Department;  
Mantralaya, Mumbai – 400 032.  
Dated the 03/01/ 2012.

Bombay Shops and  
Establishments  
Act,1948 and  
Information  
Technology Act,  
2000.

No.BSE-2009/C.R.122/Lab-10:- In exercise of the powers conferred by section 67 of the Bombay Shops and Establishments Act, 1948 (Bom. LXXIX of 1948) read with sections 6 and 90 of the Information Technology Act, 2000 (21 of 2000); and of all other powers enabling it in that behalf, the Government of Maharashtra hereby makes the following rules further to amend the Maharashtra Shops and Establishment Rules,1961, the same having been previously published as required by the sub-section (3) of the said section 67:-

1. **Short title & commencement.**(1) These rules may be called the Maharashtra Shops and Establishments (Amendment) Rules, 2012.

(2) Save as otherwise provided in sub-rule(3), these rules shall come into force at once.

(3)The provisions of rule 3, so far as it relates to insertion of rule 23 in the Maharashtra Shops and Establishment Rules,1961, shall come into force on such date as the State Government may, by notification in the *Official Gazette*, appoint which shall not be later than six month from the date of issue of this notification. 2.

After rule 20 A of the Maharashtra Shops and Establishments Rules, 1961 (hereinafter referred to as “the principal rules”), the following rule shall be inserted, namely :-

“**20B.** Every employer shall display a notice on the notice board in a establishment that “No child labourers are engaged”. The words and letters on the said notice board shall be in DVB-TT Surekh Font and with a Lemon-Yellow colour background written in Navy-Blue colour”.

3. After rule 21 of the principal rules, the following rules shall be added, namely :-

“ 22. Every employer shall submit statements, application for registration, renewal of registration certificate, application for exemption, notices or any other application or documents and fees as prescribed in these rules, electronically.

23. (1) The employer shall pay the electronic transaction charges for availing e-services for submitting statements, applications for registration, renewal of registration certificate, application for exemption, notices or any other application or documents and for paying fees prescribed in these rules, electronically, as provided in sub-rule (2).

(2) The electronic transaction charges for the purposes of sub-rule (1) shall be as follows, namely :-

Sr. No	Documents	Charges (in rupees)	
		Up to 10 Labour	More than 10 Labour
1	Application for registration	50	100
2	Application for renewal of registration certificate	50	100
3	Statement	20	80
4	Application for exemption	50	50
5	Any other application or documents	50	50

4. For Form A appended to the principle rules, the following Forms shall be substituted, namely :-

“Form A  
Statement  
(See rule 5)

Statement for the period ending \_\_\_\_\_

(establishments employing one or more employees are required to submit this statement electronically)

General information		
1	Name and address of shop/establishment street, city, district	
2	Name and designation of owner/employer	
3	Name of manager	

4	Contact details of owner/employer	Telephone e-mail	Fax Mobile	
5	Contact details of manager	Telephone e-mail	Fax Mobile	
6	Registration date and number of shop/establishment and expiry date	Number	Expiry date	
7	Legal/status of establishment	(a) Proprietorship Firm (b) Partnership Firm (c) Private Limited Company (d) Public Limited Company (e) Cooperative Firm (f) Other (Please Specify)		
8	Sector	(a) national (b) foreign (c) joint (national and foreign)		
9	Whether it is declared as Public Utility Service	Yes/No		
10	Nature of establishment	(a) Shop (b) Commercial establishment (c) Residential hotel (d) Restaurant/eating house (e) Theatre (f) Place of public amusement or entertainment		
11	If a commercial establishment , please indicate business activity (e.g. bank, office, hospital construction etc.)			
12	Date of commencement			
13	Weekly day of rest			
<b>Workforce</b>				
		Male	Female	Total
14	Number of permanent employees Managers and supervisors Workers over 18 years Workers of Age 15 to 18 years Workers below 15 years			
15	Maximum Number Contract workmen employed on any day during the year (if Inter State Migrant workers employed please specify separately)			
16	Number Daily wage workers Permanent Temporary Casual			
17	Number Apprentices Number Trainees			
18	Number Family members paid Unpaid			
19	For permanent workers, how many years of service ? Less than 1 year 1 to 5 years 6 to 10 years more than 10 years			
20	Number of security guards employed Direct Through Board Through Contractor Other (Please Specify)			

21	Number of Housekeeping staff Direct Through Contractor Other (Please Specify)			
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### Inspections

22	Date of the last inspection by a shops inspector/GLO?	Date
23	Does the establishment hold any ISO, SA or other similar certification?	Yes/No If YES, what was the last date of certificate renewal?

### Safety and health

24	Does the establishment have a written safety and health policy?	Yes/No If YES, How is this communicated to workers? (a) notice board (b) circular (c) other If YES, What language is used? (a) Marathi (b) Hindi (c) English
25	Does the establishment have written safety and health rules?	Yes/No If YES, How is this communicated to workers? (a) notice board (b) circular (c) other If YES, What language is used? (a) Marathi (b) Hindi (c) English
26	Does the establishment have a safety mechanism? ( Please specify e.g. safety committee, safety officers, evacuation plan)	
27	Are fire extinguishers placed throughout the establishment?	Yes/No If YES, how many extinguishers in total? _____ If YES, how many workers have been trained to use extinguishers?_
28	Does the establishment have first aid boxes?	Yes/No If YES, how many throughout the establishment? ____ If YES, how often are they checked for their contents?_____
29	Do any worker have a first aid certificate?	If YES, how many? _____
30	Does the establishment have a HIV/AIDS policy?	Yes/No
31	Does the establishment provide workers with a uniform?	Yes/No If YES, do workers have to pay for the uniform? Yes/No
32	Did you provide your contract labour with protective clothing and equipment?	If YES, which items are provided? Foot protection ( ) Eye protection ( ) Ear protection ( ) Hand protection ( ) Head ( ) Body protection ( ) Respiratory protection ( ) Other _____

33	Does the establishment use natural ventilation such as open windows, open doors and ceiling ventilators?	Yes/No
34	Does the establishment use ceiling or stand fans to help with air circulation?	Yes/No
35	Does the establishment have air-conditioning?	Yes/No If YES, is it for the entire building? Yes/No
36	Does the establishment rely solely on natural lighting?	Yes/No
37	Are any safety posters displayed in the establishment?	Yes/No
38	Does any accident occurred in the establishment during the reporting period?	Yes/No If YES, how many non-fatal? _____ how many fatal? _____

### Welfare facilities

		Yes	No
39	Does the establishment provide drinking water for workers?		
40	Does the establishment provide any child care facilities for workers?		
41	Does the establishment have a canteen?		
42	Does the establishment provide free meals for workers?		
43	Does the establishment provide a locker for workers?		
44	Does the establishment provide a Washing facilities for workers?		
45	Is there a changing room for workers?		
46	Is there a rest room for workers?		
47	Does the establishment provide medical services for workers?		
48	If medical services are provided, are these free of charge to workers?		
49	Does the establishment have separate toilets for men and women workers? If YES, how many latrines for men? how many urinals for men? how many latrines for women?		
50	Does the establishment have either a full-time or part-time welfare officer?		
51	Does the establishment provide on-site accommodation for workers?		
52	Does the establishment provide off-site accommodation for workers?		
53	If accommodation is provided, is it provided free of charge?		

### Industrial Relations

54	Are workers represented by a trade union?	Yes/No If YES, how many unions exist? (specify names)
55	Does any single union have representative status?	Yes/No If YES, specify name and address
56	Does the establishment have a collective bargaining agreement?	Yes/No If YES, Specify the period
57	Does the establishment have a written grievance procedure?	Yes/No
58	Does the establishment have a works committee or similar body?	Yes/No If YES, how many management representatives? _____ how many worker representatives? _____ how many times did it meet during the reporting period? _____
59	Are contract labour represented by a trade union?	Yes/No
60	Is there a set procedure that is followed if there is a dispute or disagreement between the contractor and the worker?	Yes/No

61	Did the establishment have any strikes during the reporting period?	Yes/No If YES, how many strikes? _____ for the entire year how many days workers were on strike? ____ how many workers were involved? _____ how many man-days were lost as a result of strikes? _____
62	Did the establishment have any lockouts during the reporting period?	Yes/No If YES, how many lockouts? _____ for the entire year how many days were locked out? ____ how many workers were involved? _____ how many man-days were lost as a result of lockouts? _____
63	Is the establishment a member of any employers' associations?	Yes/No If YES, name and address of association(s) _____
64	Does the establishment operate a suggestion box scheme?	Yes/No If YES, number of useful suggestions received during the period? _____ how many suggestions were acted upon? _____ were workers rewarded for suggestions? _____

### Strike and Lock out

65	Was notice of the strike or lockout given?	Yes/No If yes, on what date was the notice given? Date _____
66	When did the strike or lockout commence?	Date _____ Time of day _____
67	Did the strike or lockout apply to the entire establishment or part only?	Entire establishment ( ) Part of establishment ( ) If part only, which part? (department, section, unit) _____ Please indicate
68	How many workers were directly affected?	Number _____
69	Were the workers directly affected the employees of a contractor, or direct employees of the principal employer, or both?	Contractor ( ) Principal employer ( ) Both ( )
70	Were the directly affected workers male or female?	Male ( ) Female ( )
71	How many workers were indirectly affected?	Number _____
72	Does the workers indirectly affected the employees of a contractor, or direct employees of the principal employer, or both?	Contractor ( ) Principal employer ( ) Both ( )
73	Were the indirectly affected workers male or female?	Male ( ) Female ( )

### Cause

74	Is the cause of the strike or lockout known?	Yes/No If yes, please describe the cause in detail
75	If the cause is known does it relate to existing rights included in the law or agreement, or is it concerned with future benefits?(e.g. demand for increased wages)	Existing rights ( ) Future benefits ( )

### Settlement procedures

76	Do procedures exist within the establishment to settle the dispute?	Yes/No If yes, please indicate (e.g. collective agreement) _____ If yes, has this procedure been used before? Yes ( ) No ( )
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### Redressal of Sexual harassment

77	Does the establishment have a written policy for prevention of sexual harassment?	Yes/No
78	Does the establishment have written rules for prevention of sexual harassment?	Yes/No
79	Does the establishment have a sexual harassment redressal committee?	Yes/No
80	Have any sexual harassment complaints been lodged within the establishment during the reporting period?	Yes/No

### Other

81	Whether identity cards have been provided to all employees?	Yes/No
82	Has the establishment engaged in any voluntary activities for the benefit of the community (as distinct from workers) during the reporting period?	Yes/No If YES what activities? _____ who benefited? _____
83	Does the establishment employ any disabled workers?	Yes/No If YES, what types of disability? (e.g. physical, sight, hearing, intellectual) _____ how many men? _____ how many women _____ what special assistance and support, if any, has been provided for them? _____

### Child Labour

84	Is there any hazardous occupations and processes carried out in the establishment? (Please see part I & II of the schedule under the Act)	Yes/No If yes, indicate the entry number of the occupation or process in the Schedule to the Child Labour Act, 1986 Occupation _____ Process _____
85	As at the reporting date does your establishment employ any persons under the age of 14 years?	Yes/No If yes, how many persons were employed? _____
86	What work do people under the age of 14 years perform? (e.g. cloth printing, motor vehicle repairs)	Describe the work for each child worker
87	How many hours does the child labour work each day?	Hours
88	How many hours does the child labour work without a break?	Hours
89	If a child labour has a work-break, how long is it?	Hours
90	What is the maximum spread- over hours for your child workers?	Hours
91	How many of your child workers work after 7.00 pm and before 8.00 am?	Number
92	How many whole days per week, does a child worker have as a holiday?	Days
93	What is the wage rate of a child worker?	Per hour           Rs. Per day            Rs. Per week          Rs. Per month         Rs.
94	Have you have taken any particulars steps to protect the safety and health of your child workers ?	Yes/No If yes, what have you done?(Explain)

95	Do your child workers attend school?	Yes/No If Yes, how many hours do they attend school per day _____ Per week _____
96	If you have employed child workers, have you notified the Department of Labour indicating the name of your establishment, the name of the responsible manager, the postal address, and the nature of occupations and processes carried out at the establishment?	Yes/No If Yes, please indicate the date on which such notice was given. Date _____
97	If you employ child workers, do you have a register showing the name and date of birth of every child employed, their hours of work, rest periods, and the nature of work performed?	Yes/No

### Equal Remuneration

		Male	Female	Total
98	Total number of employees			
99	How many employees have the same job? (This means that their tasks and responsibilities are the same or very nearly the same.)			
100	How much pay (including dearness allowances) does a female worker in 20 above receive per pay period?	--		--
101	How much pay (including dearness allowance) does a male worker in 20 above receive per pay period ?		--	--
102	How many employees with the same job receive a house rent allowance ?			
103	How many employees with the same job receive other allowances?			
		Yes		No
104	Do employees with the same job received the same house rent allowance?			
105	Do employees with the same job receive other allowances that are the same?			
106	If male and female employees doing the same job are not paid the same pay (including dearness allowance) please explain why.	Explanation		
107	If male and female employees doing the same job are not paid the same allowances please explain why.	Explanation		

### Wages and benefits

108	What is the lowest wage per month paid to a permanent worker in your establishment (excluding other allowances and overtime but including dearness allowance?)	Rs.
109	As at the reporting date, how many permanent workers actually receive this wage?	Number
110	Do workers receive attendance card cum wage slips?	Yes/No
111	Do workers receive written or computerized pay slips?	Yes/No



112	Are workers required to work overtime?	Yes/ No If yes, what is the overtime rate of pay? _____ If yes, what was the highest number of overtime hours worked by a worker last month?
113	How many hours per day (without overtime) do permanent workers work? How many days per week? How many weeks per year?	Number _____ _____ _____
114	What is the maximum spread-over hours for workers in the establishment?	Number _____
115	Were workers paid a bonus for the last financial year?	Yes/ No If YES, what was the percentage bonus rate? _____ how many workers were paid a bonus? _____ what was the total amount of bonus payments for the entire establishment? Rs. _____
116	Did some workers take maternity leave during the reporting period?	Yes/No If YES, how many? _____ What was the amount of their medical bonus per person? Rs. _____ What was the total amount of maternity benefit payments (as distinct from bonus) for the establishment as a whole? Rs. _____
117	Were some workers paid a gratuity during the reporting period?	Yes/No If YES, how many applied for a gratuity payment? _____ how many were approved for a gratuity payment? ____ what was the total amount of gratuity payments for the factory as a whole? Rs. _____ how many gratuity payments were for the maximum possible amount? _____
118	Do some men and women in the establishment do the same job?	Yes/No If YES, do they receive the same pay? Yes No Do they receive the same allowances? Yes No

### Rent allowance

119	Does the employer provide accommodation for employees?	Yes/No If YES, is the accommodation provided free and without deduction from an employee's wages? Yes ( ) No ( )
120	How many of your employees were paid a house rent allowance for the last month of the reporting period?	Number _____
121	Is the house rent allowance calculated as 5% of wages (basic wage plus dearness allowance)?	Yes/No If No, how is it calculated? _____
122	What was the highest house rent allowance paid to any employee during the last month of the reporting period?	Rs. _____
123	What was the total amount of house rent allowance paid to all employees during the last month of the reporting period?	Rs. _____
124	Was the house rent allowance paid before the month to which it applies, during that month, or after that month?	Before ( ) During ( ) After ( ) If after, how many days after was it paid? _____

### Disputes Regarding HRA

125	Were there any disputes over house rent allowance during the period?	Yes/No If yes, how many disputes? _____
126	Are workers represented by a trade union?	Yes/No If Yes, what is the name of the trade union? _____
127	If there were disputes over house rent allowance, how were they resolved?	Negotiation ( ) Conciliation ( ) Other ( )

### Compensation/Ex-gratia details

128		Name of worker	Pay-scale	Compensation paid	Ex-gratia	Whether legal heirs employed
129	Injured					
	Died					

### Contract Labour

130	How many different contracts for supplying labour did you have during the reporting period	Number _____
131	Did any of your contract labour have contracts for the completion of a particular task (rather than a contract for specific period of time)?	Yes/No
132	Total No. of days during the year on which contract labour was employed	
133	Total No. of man days worked by contract labour during the year	
134	Total No. of days during the year on which directly employees were employed	
135	Total No. of man days worked by directly employed workmen	
136	Nature of work on which contract labour was employed	
137	How were wages for your contract labour calculated ?	Piece rates only ( ) Time related pay only ( ) A mixture of piece rates and time-related pay ( )
138	Whether contract labours are paid equal wages of permanent labour for doing the same kind or same nature of work?	Yes/No
139	Whether the contract labour are provided with same service conditions for doing same kind or same nature of work?	Yes/No
140	What was the lowest wage per month (including DA but excluding other allowances) paid to a contract worker during the reporting period?  During the reporting period, how many contract labour actually received this wage ?	Rs. _____  Number _____

141	Did you provide contract labour with their tools?	Yes/No
142	Did you provide transport to labour to and from the workplace each day?	Yes/No
143	Did you pay the medical bills if a contract worker was sick?	Yes/No
144	Did you pay the medical bills if a worker is injured at work ?	Yes/No If No, why?_____
145	Any other benefit provided to the contract labours	
146	What was the amount of the security deposit for each contract?	Indicate amount in Rs. for each contract.
147	Whether license under the Act was ever suspended/revoked/cancelled?	
148	Was the security deposited forfeited in full or in part for any contract?	Yes/No If yes, give details explaining why the deposit was forfeited.
149	Whether there is any change in the management of the establishment, its location or any other particulars furnished to Registering officer in the form of Application for Registration at the time of Registration, If so, from what date.	

I verify and state that the above information is true and correct to the best of my knowledge and belief.

Signature of owner/employer

Name

Designation

Date

Form AA  
Monthly Statement  
(See rule 5)

Salary statement for the month ended \_\_\_\_\_

This statement is to be submitted by all establishments electronically

**General information (to be filled)**

1	Name and address of establishment street, city, district	
2	Name and designation of owner/employer	
3	Name and designation of manager	
4	Contact details of employer	Telephone e-mail Fax Mobile
5	Contact details of manager	Telephone e-mail Fax Mobile
6	Unique establishment number	
7	Registration number, expiry, and title of Act under which registration is held (e.g. Factories Act, Motor Transport Workers Act, Contract Labour (R&A) Act	Registration Number Expiry date

8	Legal status of establishment (in a dropdown)	(a) Proprietorship (b) partnership (c) Private Limited Company (d) Public Limited Company (e) Cooperative Firm (f) Family business (g) other							
9	Ownership (in a dropdown)	a) national (b) foreign (c) joint national and foreign							
10	Type of employment as per the Schedule in the Minimum Wages Act, 1948 (Examples: Engineering, Shops and Establishments, Laundry, Rubber, Plastics, etc.)	Schedule of Employment (Write as appropriate)							
11	Date of commencement of business								
<b>Workforce</b>									
		Workers over 18 years		Workers over 15 years but < 18 years		Workers below 15 years		Total	
		M	F	M	F	M	F	M	F
12	Managers and supervisors (whose wage < 10,000)								
13	Number of permanent employees								
14	Contract workers								
15	<ul style="list-style-type: none"> <li>• Temporary workers</li> <li>• Casual workers</li> <li>• Badli workers</li> </ul>								
16	<ul style="list-style-type: none"> <li>• Apprentices</li> <li>• Trainees</li> </ul>								
17	<ul style="list-style-type: none"> <li>• Family members</li> <li>• Paid</li> <li>• Unpaid</li> </ul>								

**Note:-** 1. Establishment having more than 50 employees shall submit this statement monthly.

2. Establishment having 21 to 50 employees shall submit monthly statements in respect of three months at the end of the quarter.

3. Establishment having 11 to 20 employees shall submit monthly statements in respect of six months at the end of six months.

4. Establishment having upto 10 employees shall submit monthly statements in respect of twelve months at the end of the year.

Name of the Establishment \_\_\_\_\_

Statement for the month \_\_\_\_\_ towards the Salary /wages paid to the employee

Employee payment details to be submitted by employer every month

Sr. No.	Name (I)	Unique Employee Number (II)	Gender (III)	Date of Payment (IV)	Bank A/c No. (V)	Gross Wages (VI)					
						Basic	DA	HRA	Maternity Benefit	Over time	Leave encashment
1											
2											
3											
4											
5											
6											

Sr. No.	Other Payment (VII)						Other Allowances	Total Payment (VIII)	Deduction (IX)				Recovery (X)	Net Income (XI)	Employer Cont. EPF (XII)			Employer Cont. ESIC (XIII)
	Bonus		Gratuity		Workmen Compensation				PF	ESI	Tax	Other			* EPS	# EPF	@ EDLIS	
	Amount	Date	Amount	Date	Amount	Date									8.33%	3.67%	0.5%	
1																		
2																		
3																		
4																		
5																		

Gross Amount \_\_\_\_\_

Net Amount \_\_\_\_\_

I verify and state that the above information is true and correct to the best of my knowledge and belief.

Date \_\_\_\_\_

Signature of owner/employer”

\* employees' pension scheme, # employees' provident fund, @ employees' deposit linked insurance scheme

5. For Form B appended to the principal rules, the following form shall be substituted, namely:-

“Form B  
Application under Section 7(2A)  
(See rule 5)  
(to be submitted electronically )

<b>General information</b>				
1	Name and address of shop/establishment street, city, district			
2	Name and designation of owner/employer			
3	Name of manager			
4	Contact details of owner/employer	Telephone e-mail	Fax Mobile	
5	Contact details of manager	Telephone e-mail	Fax Mobile	
6	Registration date and number of shop/establishment and expiry date	Number	Expiry date	
7	Legal/status of establishment	(a )Proprietorship Firm (b) Partnership Firm (c) Private Limited Company (d) Public Limited Company (e) Cooperative Firm (f) Other (Please Specify)		
8	Sector	(a) national (b) foreign (c) joint (national and foreign)		
9	Whether it is declared as Public Utility Service	Yes/No		
10	Nature of establishment	(g) Shop (h) Commercial establishment (i) Residential hotel (j) Restaurant/eating house (k) Theatre (l) Place of public amusement or entertainment		
11	If a commercial establishment , please indicate business activity (e.g. bank, office, hospital construction etc.)			
12	Date of commencement			
13	Weekly day of rest			
<b>Workforce</b>				
		Male	Female	Total
14	Number of permanent employees Managers and supervisors Workers over 18 years Workers of Age 15 to 18 years Workers below 15 years			

15	Maximum Number Contract workmen employed on any day during the year (if Inter State Migrant workers employed please specify separately)			
16	Number Daily wage workers Permanent Temporary Casual			
17	Number Apprentices Number Trainees			
18	Number Family members paid Unpaid			
19	For permanent workers, how many years of service ? Less than 1 year 1 to 5 years 6 to 10 years more than 10 years			
20	Number of security guards employed Direct Through Board Through Contractor Other (Please Specify)			
21	Number of Housekeeping staff Direct Through Contractor Other (Please Specify)			

### Inspections

22	Date of the last inspection by a shops inspector/GLO?	Date
23	Does the establishment hold any ISO, SA or other similar certification?	Yes/No If YES, what was the last date of certificate renewal?

### Safety and health

24	Does the establishment have a written safety and health policy?	Yes/No If YES, How is this communicated to workers? (a) notice board (b) circular (c) other If YES, What language is used? (a) Marathi (b) Hindi (c) English
25	Does the establishment have written safety and health rules?	Yes/No If YES, How is this communicated to workers? (a) notice board (b) circular (c) other If YES, What language is used? (a) Marathi (b) Hindi (c) English
26	Does the establishment have a safety mechanism? ( Please specify e.g. safety committee, safety officers, evacuation plan)	
27	Are fire extinguishers placed throughout the establishment?	Yes/No If YES, how many extinguishers in total? _____ If YES, how many workers have been trained to use extinguishers?_

28	Does the establishment have first aid boxes?	Yes/No If YES, how many throughout the establishment? ____ If YES, how often are they checked for their contents? _____
29	Do any worker have a first aid certificate?	If YES, how many? _____
30	Does the establishment have a HIV/AIDS policy?	Yes/No
31	Does the establishment provide workers with a uniform?	Yes/No If YES, do workers have to pay for the uniform? Yes/No
32	Did you provide your contract labour with protective clothing and equipment?	If YES, which items are provided? Foot protection ( ) Eye protection ( ) Ear protection ( ) Hand protection ( ) Head ( ) Body protection ( ) Respiratory protection ( ) Other _____
33	Does the establishment use natural ventilation such as open windows, open doors and ceiling ventilators?	Yes/No
34	Does the establishment use ceiling or standard fans to help with air circulation?	Yes/No
35	Does the establishment have air-conditioning?	Yes/No If YES, is it for the entire building? Yes/No
36	Does the establishment rely solely on natural lighting?	Yes/No
37	Are any safety posters displayed in the establishment?	Yes/No
38	Does any accident occurred in the establishment during the reporting period?	Yes/No If YES, how many non-fatal? _____ how many fatal? _____

### Welfare facilities

		Yes	No
39	Does the establishment provide drinking water for workers?		
40	Does the establishment provide any child care facilities for workers?		
41	Does the establishment have a canteen?		
42	Does the establishment provide free meals for workers?		
43	Does the establishment provide a locker for workers?		
44	Does the establishment provide a Washing facilities for workers?		
45	Is there a changing room for workers?		
46	Is there a rest room for workers?		
47	Does the establishment provide medical services for workers?		
48	If medical services are provided, are these free of charge to workers?		
49	Does the establishment have separate toilets for men and women workers? If YES, how many latrines for men? how many urinals for men? how many latrines for women?		
50	Does the establishment have either a full-time or part-time welfare officer?		
51	Does the establishment provide on-site accommodation for workers?		
52	Does the establishment provide off-site accommodation for workers?		
53	If accommodation is provided, is it provided free of charge?		



## Industrial Relations

54	Are workers represented by a trade union?	Yes/No If YES, how many unions exist? (specify names)
55	Does any single union have representative status?	Yes/No If YES, specify name and address
56	Does the establishment have a collective bargaining agreement?	Yes/No If YES, Specify the period
57	Does the establishment have a written grievance procedure?	Yes/No
58	Does the enterprise have a works committee or similar body?	Yes/No If YES, how many management representatives? ____ how many worker representatives? ____ how many times did it meet during the reporting period?__
59	Are contract labour represented by a trade union?	Yes/No
60	Is there a set procedure that is followed if there is a dispute or disagreement between the contractor and the worker?	Yes/No
61	Did the establishment have any strikes during the reporting period?	Yes/No If YES, how many strikes? ____ for the entire year how many days workers were on strike? ____ how many workers were involved? ____ how many man-days were lost as a result of strikes? ____
62	Did the establishment have any lockouts during the reporting period?	Yes/No If YES, how many lockouts? ____ for the entire year how many days workers were locked out? ____ how many workers were involved? ____ how many man-days were lost as a result of lockouts? ____
63	Is the establishment a member of any employers' associations?	Yes/No If YES, name and address of association(s)? ____
64	Does the establishment operate a suggestion box scheme?	Yes/No If YES, number of useful suggestions received during the period? ____ how many suggestions were acted upon? ____ were workers rewarded for suggestions? ____

## Strike and Lock out

65	Was notice of the strike or lockout given?	Yes/No If yes, on what date was the notice given? Date? _____
66	When did the strike or lockout commence?	Date _____ Time of day _____
67	Did the strike or lockout apply to the entire establishment or part only?	Entire establishment ( ) Part of establishment ( ) If part only, which part (Department, section, unit)? Please indicate

68	How many workers were directly affected?	Number _____
69	Were the workers directly affected the employees of a contractor, or direct employees of the principal employer, or both?	Contractor ( ) Principal employer ( ) Both ( )
70	Were the directly affected workers male or female?	Male ( ) Female ( )
71	How many workers were indirectly affected?	Number _____
72	Does the workers indirectly affected the employees of a contractor, or direct employees of the principal employer, or both?	Contractor ( ) Principal employer ( ) Both ( )
73	Were the indirectly affected workers male or female?	Male ( ) Female ( )

### Cause

74	Is the cause of the strike or lockout known?	Yes/No If yes, please describe the cause in detail
75	If the cause is known does it relate to existing rights included in the law or agreement, or is it concerned with future benefits (e.g. demand for increased wages)?	Existing rights ( ) Future benefits ( )

### Settlement procedures

76	Do procedures exist within the establishment to settle the dispute?	Yes/No If yes, please indicate (e.g. collective agreement) _____ If yes, has this procedure been used before? Yes ( ) No ( )
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### Redressal of Sexual harassment

77	Does the establishment have a written policy for prevention of sexual harassment?	Yes/No
78	Does the establishment have written rules for prevention of sexual harassment?	Yes/No
79	Does the establishment have a sexual harassment redressal committee?	Yes/No
80	Have any sexual harassment complaints been lodged within the establishment during the reporting period?	Yes/No

### Other

81	Whether identity cards have been provided to all employees?	Yes/No
82	Has the establishment engaged in any voluntary activities for the benefit of the community (as distinct from workers) during the reporting period?	Yes/No If YES what activities? _____ who benefited? _____
83	Does the establishment employ any disabled workers?	Yes/No If YES, what types of disability? (e.g. physical, sight, hearing, intellectual) _____ how many men? _____ how many women _____ what special assistance and support, if any, has been provided for them? _____

## Child Labour

84	Is there any hazardous occupations and processes carried out in the establishment? (Please see part I & II of the schedule under the Act)	Yes/No If yes, indicate the entry number of the occupation or process in the Schedule to the Child Labour Act, 1986 Occupation _____ Process _____
85	As at the reporting date does your establishment employ any persons under the age of 14 years?	Yes/No If yes, how many persons were employed? _____
86	What work do people under the age of 14 years perform? (e.g. cloth printing, motor vehicle repairs)	Describe the work for each child worker
87	How many hours does the child work each day?	Hours
88	How many hours does the child work without a break?	Hours
89	If a child has a work-break, how long is it?	Hours
90	What is the maximum spread- over hours for your child workers?	Hours
91	How many of your child workers work after 7.00 pm and before 8.00 am?	Number
92	How many whole days per week, does a child worker have as a holiday?	Days
93	What is the wage rate of a child worker?	Per hour                      Rs. Per day                        Rs. Per week                      Rs. Per month                     Rs.
94	Have you have taken any particulars steps to protect the safety and health of your child workers ?	Yes/No If yes, what have you done?(Explain)
95	Do you child workers attend school?	Yes/No If Yes, how many hours do they attend school per day _____? Per week _____ ?
96	If you have employed child workers, have you notified the Department of Labour indicating the name of your establishment, the name of the responsible manager, the postal address, and the nature of occupations and processes carried out at the establishment?	Yes/No If Yes, please indicate the date on which such notice was given. Date
97	If you employ child workers, do you have a register showing the name and date of birth of every child employed, their hours of work, rest periods, and the nature of work performed?	

## Equal Remuneration

		Male	Female	Total
98	Total number of employees			
99	How many employees have the same job? (This means that their tasks and responsibilities are the same or very nearly the same.)			
100	How much pay (including dearness allowances) does a female worker in 20 above receive per pay period?	--		--
101	How much pay (including dearness allowance) does a male worker in 20 above receive per pay period ?		--	--

102	How many employees with the same job receive a house rent allowance ?			
103	How many employees with the same job receive other allowances?			
		Yes		No
104	Do employees with the same job received the same house rent allowance?			
105	Do employees with the same job receive other allowances that are the same?			
106	If male and female employees doing the same job are not paid the same pay (including dearness allowance) please explain why.	Explanation		
107	If male and female employees doing the same job are not paid the same allowances please explain why.	Explanation		

### Wages and benefits

108	What is the lowest wage per month paid to a permanent worker in your establishment (excluding allowances and overtime but including dearness allowance?)	
109	As at the reporting date, how many permanent workers actually receive this wage?	
110	Do workers receive attendance card cum wage slips?	
111	Do workers receive written or computerized pay slips?	Yes/No
112	Are workers required to work overtime?	Yes/ No If yes, what is the overtime rate of pay? _____ If yes, what was the highest number of overtime hours worked by a worker last month?
113	How many hours per day (without overtime) do permanent workers work? How many days per week? How many weeks per year?	Number _____ _____ _____
114	What is the maximum spread-over hours for workers in the establishment?	Number _____
115	Were workers paid a bonus for the last financial year?	Yes/ No If YES, what was the percentage bonus rate? _____ how many workers were paid a bonus? _____ what was the total amount of bonus payments for the entire establishment? Rs. _____
116	Did some workers take maternity leave during the reporting period?	Yes/No If YES, how many? _____ What was the amount of their medical bonus per person? Rs. _____ What was the total amount of maternity benefit payments (as distinct from bonus) for the Establishment as a whole? Rs. _____
117	Were some workers paid a gratuity during the reporting period?	Yes/No If YES, how many applied for a gratuity payment? ____ how many were approved for a gratuity payment? ____ what was the total amount of gratuity payments for the factory as a whole? Rs. _____ how many gratuity payments were for the maximum possible amount? _____

118	Do some men and women in the establishment do the same job?	Yes/No If YES, do they receive the same pay? Yes No Do they receive the same allowances? Yes No
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### Rent allowance

119	Does the employer provide accommodation for employees?	Yes/No If YES, is the accommodation provided free and without deduction from an employee's wages? Yes ( ) No ( )
120	How many of your employees were paid a house rent allowance for the last month of the reporting period?	Number _____
121	Is the house rent allowance calculated as 5% of wages (basic wage plus dearness allowance)?	Yes/No If No, how is it calculated? _____
122	What was the highest house rent allowance paid to any employee during the last month of the reporting period?	Rs. _____
123	What was the total amount of house rent allowance paid to all employees during the last month of the reporting period?	Rs. _____
124	Was the house rent allowance paid before the month to which it applies, during that month, or after that month?	Before ( ) During ( ) After ( ) If after, how many days after was it paid? _____

### Disputes Regarding HRA

125	Were there any disputes over house rent allowance during the period?	Yes/No If yes, how many disputes? _____
126	Are workers represented by a trade union?	Yes/No If Yes, what is the name of the trade union? _____
127	If there were disputes over rent allowance, how were they resolved?	Negotiation ( ) Conciliation ( ) Other ( )

### Compensation/Ex-gratia details

128		Name of worker	Pay-scale	Compensation paid	Ex-gratia	Whether legal heirs employed
129	Injured					
	Died					

### Contract Labour

130	How many different contracts for supplying labour did you have during the reporting period	Number
131	Did any of your contract labour have contracts for the completion of a particular task (rather than a contract for specific period of time)?	Yes/No
132	Total No. of days during the year on which contract labour was employed	

133	Total No. of man days worked by contract labour during the year	
134	Total No. of days during the year on which directly employees were employed	
135	Total No. of man days worked by directly employed workmen	
136	Nature of work on which contract labour was employed	
137	How were wages for your contract labour calculated	Piece rates only ( ) Time related pay only ( ) A mixture of piece rates and time-related pay ( )
138	Whether contract labours are paid equal wages of permanent labour for doing the same kind or same nature of work?	
139	Whether the contract labour are provided with same service conditions for doing same kind or same nature of work?	
140	What was the lowest wage per month (including DA but excluding other allowances) paid to a contract worker during the reporting period?  During the reporting period, how many contract labour actually received this wage ?	
141	Did you provide contract labour with their tools?	Yes/No
142	Did you provide transport to labour to and from the workplace each day?	Yes/No
143	Did you pay the medical bills if a contract worker was sick?	Yes/No
144	Did you pay the medical bills if a worker is injured at work ?	Yes/No If No, why?
145	Any other benefit provided to the contract labours?	
146	What was the amount of the security deposit for each contract?	Indicate amount in Rs. for each contract.
147	Whether license under the Act was ever suspended/revoked/cancelled?	
148	Was the security deposited forfeited in full or in part for any contract?	Yes/No If yes, give details explaining why the deposit was forfeited.
149	Whether there is any change in the management of the establishment, its location or any other particulars furnished to Registering officer in the form of Application for Registration at the time of Registration, If so, from what date.	
150	Whether monthly statement as prescribed in Form AA has been furnished every month electronically ?	
151	If not, missing monthly statement to be provided electronically.	

**Date**

**(Signature of employer)**

- Note :-** (1) This application shall be sent to the inspector of the local area concerned.  
(2) If employer is more than one individuals, names and addresses of all individuals concerned should be given in item 2 separately.

- (3) "Establishment in Public Sector" means an establishment owned, controlled or managed by,-
- (i) the Government or a Department of the Government;
  - (ii) The Government Company as defined in Section 617 of the Companies Act, 1956 (1 of 1956);
  - (iii) a corporation (including Co-operative Society) established by or under Central Provincial or State Act, which is owned, controlled or managed by the Government a local authority;
- (4) "Establishment in Private Sector" means an establishment which is not an establishment in Public Sector."

By order and in the name of the Governor of Maharashtra,

(Dr.Kavita Gupta)  
Principal Secretary to Government

To be published in the Maharashtra Government Gazette, Part I-L. Extra Ordinary, dated the 03/01/2012 and to be returned with 500 copies of the print to Government of Maharashtra and 200 copies of the print may be sent to the Commissioner of Labour, Mumbai, direct.

(Dr.Kavita Gupta)  
Principal Secretary to Government

Copy to,  
Commissioner of Labour, Kamgar Bhavan, Bandra-Kurla Complex, Bandra (E),  
Mumbai- 400 051.