

# EMPLOYERS' REGISTRATION FORM

(Regulation 10-B)

## Form-01

Employer's Code No. \_\_\_\_\_

1 Name of the Factory/Establishment \_\_\_\_\_

2 Complete Postal Address of the  
Factory/Establishment \_\_\_\_\_  
\_\_\_\_\_

3 a) Telephone No. If any \_\_\_\_\_ b) Fax No. If any \_\_\_\_\_  
c) E-mail address, If any \_\_\_\_\_

4 Location of Factory / Establishment \_\_\_\_\_

a) State \_\_\_\_\_ d) Name of Town/Village \_\_\_\_\_

b) District \_\_\_\_\_ (Taluk/Tehsil \_\_\_\_\_)

c) Municipality Ward \_\_\_\_\_ e) Police Station \_\_\_\_\_

f) Revenue Demarca Hudbast No \_\_\_\_\_

5 a) Whether the building/premises of Factory/Estt. \_\_\_\_\_  
Is owned or hired.

if hired or there is a change in the name of  
Unit/Ownership, please indicate \_\_\_\_\_

i) ESI Code No., if covered earlier \_\_\_\_\_

ii) Date from which earlier Factory/Estt. \_\_\_\_\_  
Closed down

iii) Terms and conditions under which property acquired / taken on lease (enclose copy of  
agreement/relevant deed)  
\_\_\_\_\_

6 Details of Bank A/c \_\_\_\_\_ b) Name of Band and Branch:-  
a) Account No. \_\_\_\_\_ i) \_\_\_\_\_

b) Account No. \_\_\_\_\_ ii) \_\_\_\_\_

7 a) Income Tax PAN/GIR No. \_\_\_\_\_

b) Income Tax Ward/Circle/Area \_\_\_\_\_

8 Exact nature of work/business carried on \_\_\_\_\_

9 Date of commencement of Factory/Estt. \_\_\_\_\_

10 a) Whether registered under Factories/Shops/  
Estt./Other Act (Please Specify) \_\_\_\_\_

b) Factory License No. Date Licensing Authority

b) Please give whichever is applicable

	No.	Date	Issuing Authority
i) Commercial Tax No.	I)		
ii) State Sales Tax No.	ii)		
iii) Central Sales Tax No.	iii)		
iv) Any other Tax No.	iv)		

c) Maximum no. of persons that can be Employed on any one day, as per license \_\_\_\_\_

d) Whether Power is used for manufacturing Process as per section-2(m) (I) or 2(m) (ii) Of the factories Act.1948.

No	Sanctioned Power Load	Issuing Authority
_____	_____	_____

e) In case of factories whether Licence Issued under Section 2(m) (I) or 2(m) (ii) Of the factories Act.1948

\_\_\_\_\_

12. a) Whether it is a Public or Pvt.Ltd co./Partnership/proprietorship/co-operative Society/Ownership (attach copy of Memorandum & Articel of Association/Partnership Deed)

\_\_\_\_\_

b) Give name ,present & permanent residential Address of the Present Prop./M.D,Director/Partners,

(1) Name \_\_\_\_\_ Designation \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

(2) Name \_\_\_\_\_ Designation \_\_\_\_\_

Address \_\_\_\_\_

13) Address(es) of the Registered office/H.O/B.O Sales office/Adm. Office (if any)

	Address	No of employees	PhoneNo	Responsible Person
i)	_____	_____	_____	_____
ii)	_____	_____	_____	_____
iii)	_____	_____	_____	_____
iv)	_____	_____	_____	_____

v) \_\_\_\_\_

14. a) Whether any work/business carried out through contractor \_\_\_\_\_

b) If yes give nature of such work/business \_\_\_\_\_

15. E.P.F Code No (If Covered under EPF Act) No. \_\_\_\_\_

Issuing Authority \_\_\_\_\_

16. Total number of employees employed for wages directly and through immediate employer on the date of application (whether manual/clerical/supervisor, connected with the Adm. Or Purchase of raw materials or distribution or sales product/service, whether permanently or temporary)

As on date	Total no of employees			No of employees drawing wages Rs.7500/- or less		
	Male	Female	Total	Male	Female	Total

Employed Directly \_\_\_\_\_

Through Contractor \_\_\_\_\_

Total \_\_\_\_\_

17. Total Wages Paid in the preceding month.

	Total Wages	Wages Paid to employees drawing wages Rs.7500/- or less
To Employees Employed Directly [ ]	[ ]	[ ]
To Employees Employed Through Contractor [ ]	[ ]	[ ]

18. Give first date since when 10/20 or more employees under ESI Act were employed for wages:-

\_\_\_\_\_

I here by declare that the statement given above is correct to the best of my knowledge and behalf. I also undertake to intimate changes, if any promptly to the Regional Office/Sub-Regional Office of ESI corporation as soon as such changes take place.

Date \_\_\_\_\_

Name & Signature \_\_\_\_\_

Place \_\_\_\_\_

Designation with Seal \_\_\_\_\_