



REGIONAL OFFICE HARYANA  
EMPLOYEES, STATE INSURANCE CORPORATION  
PANCHDEEP BHAWAN: SECTOR-16: FARIDABAD

REGD. A.D.  
FORM C-11

NO. 13/33000/101

TO.

M/S B.S.S.

Maya Complex, Old Dehi Road, Opp. Rai  
Bhojnalaya, VPO-Dundahera. GRG.

4236

Dated: 11/12/06

✓ Mr. Rakesh Kumar S/o - Zile Singh  
R/O-Z-1, New palam Vihar,  
Gurgaon.

**Sub: Implementation of the E.S.I. Act, 1948-Registration of Employees, and Factories/Establishment under section 2(12)/1(5) of the E.S.I Act, 1948 as amended.**

Dear Sir,

1. I have to inform that Section 1(3) of ESI Act. the Central Government has vide Notification No S.O. 604 dated 22.2.66 made the provisions of the Act. applicable to all factories covered under the Act, with in the area **Dundahera**.
2. I have further to inform you that the appropriate Government has extended the provisions of the Act to other establishment under section 1(5) of the ESI Act with effect from 27.2.66 vide notification no 3077-5-Lab-75/9070 dated 30/3/75
3. Under Section 2A of the Act. such a Factory/Establishment is required to register itself under the Act. and Chapter IV thereof casts a responsibility on the Principal Employer thereof to Insure its employees and to pay contribution in respect of such employees covered under the Act.
4. On the basis of the particulars in respect of your Factory/Establishment submitted by you the report of the Inspection conducted by the Insurance Inspector/Branch Manager of your Factory/Establishment on 16.11.2006 your Factory/Establishment falls within the previews of Section 2(12)/1(5) of the Act, w.e.f. 01.7.2006 (P) in case however, subsequent facts reveal that your factory/Establishment was coverable from a date prior to the date mentioned above, you shall make yourself liable to comply with the provisions of the Act, from such earlier date.
5. You are requested to take immediate steps for registration of your employees filling in Declaration Forms and payment of contribution, maintenance of records etc. from the date of coverage of your Factory/Establishment under the Act.
6. For the sake of convenience your Establishment has been allotted Code No. 13/33000/101 which may kindly be used in all communications sent to this office and all forms at the places indicated for the purpose. The Branch Office of the Corporation situated at **Dundahera** has been instructed to render necessary assistance to you in connection with registration of your employees. in case you find any difficulty or for any other purpose which may be necessary in connection with the Scheme. you are requested to contact the Manager of the above Local Office who will render necessary help in the matter.
7. It is requested that publicity may kindly be given to lists of Insurance Medical Practitioners/State Insurance Dispensaries, in your Factory/Establishment to enable your employees to choose their State Insurance Dispensaries/Insurance Medical Practitioners Required from etc. may please be collected from the Local Office mentioned above to which all your employees will also be attached.
8. A list of Bank Branches who are authorized to accept ESI contribution is enclosed. You may kindly choose one of these branches convenient to you under intimation to this office and to the concerned branch of the State Bank of India and deposit the ESI dues in the Branch only. In case no intimation is received within 15 days of the receipt of this letter the amount of contribution deposit in one of the specified branch would be considered as Nominated Branch for your Factory/Establishment.
9. The Corporation Officials would be pleased to render all necessary and possible assistance to you in discharging you duties and obligations under the ESI Act, 1948 and I am confident of prompt and timely compliance with the provisions of the ESI Act, and Regulations on your part.
10. As per Regulation 10-C, the employer in respect of factory/Establishment to which the Act applies and to whom a code no. has been allotted, shall furnish to the appropriate Regional Office/Divisional Office by 31<sup>st</sup> January of every year a return in Form-01-A

Yours faithfully,

FOR REGIONAL DIRECTOR

1. Insurance Inspector **Dundahera**. Please check complete records & recommend FDC within three months.
2. Branch Manager **Dundahera**.
3. Registration Branch/Inspection Branch.
4. Benefit Branch.
5. EPF OFFICE, Sector-15-A, Faridabad.
6. Ledger section) No. of employees according to Survey Report/Form - 01) 63

FOR REGIONAL DIRECTOR