

FORM 10

[See Rule-48(b)]

Register for Deductions for Damage or Loss

Name and Address of the
Establishment where building
or other construction work is
carried on/is to be carried on

Name and Permanent
Address of building worker

Name and Permanent
Address of Employer

Nature of Building or other construction work

Sl. No.	Name of worker	Father's/ Husband name	Designation/ Nature of employment	Particulars of damage or loss	Date of damage or loss	Whether building worker showed cause against deduction
1	2	3	4	5	6	7

Name of person in whose presence building worker's explanation was heard	Amount of deduction imposed	No. of installments	Date of recovery	
			First Installment	Last Installment
8	9	10	11	12