

FORM 6

[See Rule 47]

Register of Building Workers Employed by the Employer

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

Name and Permanent Address of
Establishment

Name and Location of work

Sl. No.	Name of workers	Father's/ Husband's name	Name of employment/ designation	Date of Commencement of employment	Signature or Thumb impression of workers
1	2	3	4	5	6

Date of termination of employee	Reasons for termination	If the building worker is/was beneficiary the date of registration as a beneficiary, the registration no. and the name of welfare board	Remarks
7	8	9	10