

FORM G

[See rule 20]

APPLICATION FOR ORDER TO DEPOSIT COMPENSATION

To Commissioner for Workmen's Compensation

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.....

....., residing at

....., applicant

versus

....., residing at

....., opposite party.

It is hereby submitted that—

(1), a workman employed by (a contractor with) the opposite party on theday of 19received personal injury by accident arising out of and in the course of his employment resulting in his death on theday of, 19..... The cause of the injury was (here insert briefly in ordinary language the cause of injury)
.....

(2) The applicant(s) is a\are dependant(s) of the deceased workman being his
.....

(3) The monthly wages of the deceased amount to Rs.....

The deceased was over\under the age of 15 years at the time of his death.

*(4) (a) Notice of the accident was served on the day of

(b) Notice was served as soon as practicable.

(c) Notice of the accident was not served (in due time) by reason of

(5) The deceased before his death received as compensation the total sum of Rs.....

.....
.....

The applicant(s) is\are accordingly entitled to receive a lump sum payment of
Rs.....

.....
.....

Your are, therefore, requested to award to the applicant the said compensation or any
other compensation to which he may be entitled.

Dated.....19...

.....

Applicant

*Strike out the clauses, which are not applicable.