



EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952 (PARA 36 (1)) and THE EMPLOYEES' PENSION SCHEME 1995 (PARA 20(1)) RETURN OF EMPLOYEES, WHO ARE ENTITLED AND REQUIRED TO BECOME MEMBERS OF THE EMPLOYEES' PROVIDENT FUND AND PENSION FUND

NAME AND ADDRESS OF THE FACT/ESTT _____ CODE NO _____

5. V M Arts & Commerce
Women's College,
ILKAL - 587125 (332)

KM-21098

INDUSTRY IN WHICH THE FACT/ESTT. IS ENGAGED Education DATE OF COVERAGE 1.9.1989

REGN. NO. OF THE FACTORY/ESTABLISHMENT N.A. DATE FROM WHICH _____

EMPLOYEES PENSION SCHEME APPLICABLE 1.1.1996.

If Factory/Estt. is covered under E.S.I. Act indicate the code No. allotted under E. S. I. _____ E.S.I. Code No. NIL

If not, furnish the details of the designated Medical Officer of the factory/establishment _____ Name of the designated Medical Officer

Specimen signature of the Employer OR Authorised Official

Sl. No.	Name	Designation	Specimen Signature
1.	<u>P. B. M. Telagadi</u>	<u>Principal</u>	<u>[Signature]</u>
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Remarks if any _____
NOTES :
1) This Form should be accompanied by declaration in Form-2 by every employee
2) Any change in the authorised official/designated Medical Officer should be intimated to the Commissioner

No. of employees enrolled as members _____
on the date of coverage _____



Signature of the employer or other authorised official _____
Date and Stamp of Factory/Establishment. _____
General Secretary
Chief Welfare Officer



Sub-Regional Office
 EMPLOYEES' STATE INSURANCE CORPORATION
 #15, Arihant Nagar, Sedam Road, Gulbarga-585103

C-11 Regd. with a.d.

To
 M/s.SVM VV SANGHA SHREE VIJAYA MAHANTESH ARTS AND COMMERCE WOMENS COLLEGE
 ILKAL
 MAHANTA GANGOTRI, NEAR BUS STAND
 .587125

Dated : 21/03/2017

Sub : Implementation of the E.S.I. act, 1948 and Registration of Employees of the Factories and Establishments under Section 1(3)/1(5) of the ESI Act, as amended.

Dear Sir(s),

1. It is informed that under section 1(3) of the ESI Act, 1948 is applicable to all factories covered under the Act within the area where your factory is situated.
2. It is further informed that the appropriate Government has extended the provisions of the Act to other establishments Under Section 1(5) of the Act in this area
3. Under Section 2 A 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 get his employees registered and pay contributions in respect of these employees covered under the Act.
4. On the basis of the particulars in respect of your factory/establishment submitted by you/ on the basis of the report of the inspection conducted by the Social Security Officer, who inspected your establishment on -NA-, your establishment falls within the purview of Section 1(5) of the Act with effect from **01/03/2017**. In case, however, subsequent facts reveal that your 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. It is requested to take immediate steps for registration of your employees by submitting declaration forms online, payment of contribution, maintenance of records etc. from the date of coverage of your factory/establishment under the act.
6. You are also requested to submit employer's registration form (form 01) on line, as required under the provisions of sec.2-A of the ESI Act , 1948 read with regulation 10-B of the ESI(General), Regulations, 1950(only in case your Code No. is allotted as a result of Survey by a Social Security Officer of ESI Corporation).
7. For the sake of convenience your factory/establishment has been allotted code No **71000036980001303** which may kindly be used in all communications sent to this office and on all forms at the place indicated for the purpose. The Branch Office of the Corporation situated at 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 Branch Office who will render necessary help in the matter.

TO
 BKN
 528 w/o
 update w/o
 21/3/2017

SV.M. 2013 o COMMERCE WOMENS COLLEGE
 ILKAL
 Inward No. 242
 Date 21-03-2017
 Initial M.H. Bhatnagar



ಶ್ರೀ ವಿಜಯಮಹಾಂತೇಶ ವಿದ್ಯಾವರ್ಧಕ ಸಂಘದ
ನೌಕರರ ಪತ್ತಿನ ಸಹಕಾರಿ ಸಂಘ. ನಿ.
ಇಲಕಲ್ಲ
www.vijayamahantesh.org

