

Name of Service

Registration of Principal Employers Establishment under the Inter State Migrant Workmen (RE&CS) Act, 1979.

Name of Department

Department of Labour and Employment, GoJK

Policy/Government Order

Inter State Migrant Workmen (RE&CS) Act, 1979

Form Fields:

#	Section	Caption Name	Type of Field	Mandatory (Yes/No)
1.	Establishment Details	Name of the establishment	Alpha/numeric	Yes
2.		Location of the establishment	Alpha/numeric	Yes
3.		Address 1	Alpha/numeric	Yes
4.		Address 2	Alpha/numeric	Yes
5.		City	Alpha	Yes
6.		District	Alpha/Dropdown	Yes
7.		Pincode: *	Numeric	Yes
8.		E mail Id	Alpha/numeric	Yes
9.		Phone Number	Alpha/numeric	Yes
10.		Nature of work carried on the establishment	Alpha/numeric	Yes
11.		Total number of Workers to be Employed	Alpha/numeric	Yes
12.	Full name and address of the principal employer	Full Name	Alpha/numeric	Yes
13.		Father's / Husband's Full Name	Alpha/numeric	Yes
14.		Address 1	Alpha/numeric	Yes
15.		Address 2	Alpha/numeric	Yes
16.		City	Alpha/numeric	Yes
17.		District	Alpha/Dropdown	Yes
18.		Pincode	Numeric	Yes
19.		Email Id	Alpha/numeric	Yes
20.		Mobile Number	Numeric	Yes

#	Section	Caption Name	Type of Field	Mandatory (Yes/No)
21.	Partner/Mem ber/Director/ Share Holder Information, if any communicati on	Full Name	Alpha/numeric	No
22.		Father's / Husband's Full Name	Alpha/numeric	No
23.		Address 1	Alpha/numeric	No
24.		Address 2	Alpha/numeric	No
25.		City	Alpha/numeric	No
26.		District	Alpha/Dropdown	No
27.		Pincode	Numeric	No
28.		Email Id	Alpha/numeric	No
29.		Full name and address of the Manager or person responsible for the supervision and control of the establishment	Full Name	Alpha/numeric
30.	Father's / Husband's Full Name		Alpha/numeric	No
31.	Address 1		Alpha/numeric	No
32.	Address 2		Alpha/numeric	No
33.	City		Alpha/numeric	No
34.	District		Alpha/Dropdown	No
35.	Pincode		Numeric	No
36.	Email Id		Alpha/numeric	No
37.	Documents	List of Contractors	Upload Option	Yes
38.		Photograph of Principal Employer	Upload Option	Yes
39.		Aadhaar Card / Election Card / Driving License of Principal Employer	Upload Option	Yes
40.		Supporting documents, if any	Upload Option	No

Appendix

FORM - I

(See Rule 3(1))

**Application of Registration of Establishments employing Migrant
Workman under the Inter State Migrant Workmen(R.E& C.S.)ACT,
1979 and The Rules framed thereunder.**

1. Name and location of the establishment.
2. Postal address of the establishment.
3. Full name and address of the principal employer (furnish father's/husband's name in the case of individuals).
4. Names and address of the Directors/particular Partners (in case of companies and firms).
5. Full name and address of the Manager or person responsible for the supervision and control of the establishment.
6. Nature of work.
7. Particulars of Contractors and migrant workman-
 - (a) Names and addresses of Contractors.
 - (b) Nature of work for which migrant workmen are to be recruited or are employed.
 - (c) Maximum number of migrant workmen to be employed on any day through each Contractor.
 - (d) Date of commencement of work under each Contractor.
 - (e) Estimated date of termination of employment of migrant workmen under each Contractor.
8. Original copy of the Treasury Challan depositing the requisite fees enclosed.

I hereby declare that the particulars given above are true to the best of my knowledge and belief.

Principal Employer,
(Seal & Stamp)

Date of receipt