## FORM-B COMBINED RETURN UNDER LABOUR LAWS AS ON 31<sup>ST</sup> MARCH,20 (SECOND SCHEDULE (See sec.2 (d) and sec.4 (6)

	ANNUAL RETURN FOR THE YEAR ENDING 31 <sup>S1</sup>	MARCH
1.	Establishment Registration /License No.(LIN)	
2.	Establishment Name	
3.	Address	
4.	Establishment details	
5.	Classification of Establishment	
6.	Employer details	
7.	Establishment category	
8.	Nature of work/ activity/business/industry of the Establishment	
9.	Total. No. of Workers (furnish details in Annexure-1)	
10	Details of payment of wages (furnish details in Annexure-2)	
11	No. of the workers allowed to work overtime in the year	
12	Amount of over time wages paid in the year	
13.	No.of workers covered under <b>EDF</b>	
14	No. of workers covered under <b>ESI</b>	
15	Details of Gratuity	
16	Details of Bonus paid	
17	Details of Employees Compensation paid	
18	Leave eligibility	
19	Details of payment of maternity benefit	
20	Details of weekly off & other holidays allowed	
21	Details of Welfare fund contribution	
22	Details of settlements / Strikes/Lock-outs/Lay-offs/ Retrenchments closures etc.  Whether Works Committee constituted	
24		
	Details of Trade Union existing in the establishment /industry  Details of contractors under Contract Labour Act	
25	Details of contractors under Contract Labour Act  Details of contractors under Inter State Migrant Workmen Act	
27	Whether muster roll, wages register etc, maintained	
28	Whether appointment letters/Identity cards issued	
29	Details of building or other construction work	
30	Note:- Combined Annual Return for the ending 31 March shall be furnished online before 30 <sup>th</sup> June of the following year	
	DECLARATION	
	I/we hereby declare that /we have complied with all relevant provisions of the Labour Act applicable to the establishment. In the case the information furnished above is found to be false, misrepresented or suppressed any material information or evaded to furnish the information, I/we are liable for prosecution as per law besides cancellation of the registration /license granted.	Signature of the Employer
	Date	
	Place	Name & Designation of the Employe