

Industrial Disputes Act, 1947

S.NO	FORMS	PAGE.NO
1	Form C	2
2	Form E	3
3	Form G1	4
4	Form H	5
5	Form I	6
6	Form J	7
7	Form K	8
8	Form K-2	9
9	Form K -3	10
10	Form K – 4	11
11	Form K – 1	12
12	Form L	13
13	Form M	14
14	Form O-2	15
15	Form O-3	16
16	Form PA	20
17	Form P	24
18	Form Q	26
19	Form QA	27
20	Form M (Rule 16)	30
21	Form A	31
22	Form F	33
23	Form G	35
24	Form H	37
25	Form I	38

FORM C
(See Rule 7)
Agreement

[Under Section 10-A of the Industrial Disputes Act, 1947]
 BETWEEN

Names of the Parties-

Representing employers:

Representing workmen/workman:

It is hereby agreed between the parties to refer the following dispute to the arbitration of[here specify the name (s) and address (es) of the arbitrator (s)].

- (i) Specific matters in disputes;
- (ii) Details of the parties to the dispute including the name and address of the establishment or undertaking involved;
- (iii) Name of the workman in case he himself is case he himself is involved in the dispute or the name of the union, if any, representing the workmen or workman in question;
- (iv) Total number of workmen employed in the undertaking affected;
- (v) Estimated number of workmen affected or likely to be affected by the dispute.

*We further agree that-

the majority decisions of the arbitrator(s) be binding on us/in case the arbitrators are equally divided in their opinion, that they shall appoint another person as umpire whose award shall be binding on us.

The arbitrator(s) shall make his/their award within a period of (here specify the period agreed upon by the parties) from the date of publication of this agreement in the Official Gazette by the appropriate Government or within such further time as is extended by mutual agreement between us in writing. In case the award is not made within the period aforementioned, the reference to arbitration shall stand automatically cancelled and we shall be free to negotiate for fresh arbitration.

Signature of the parties.

Representing employer.

**Workman/Representing

workman/workmen. Witnesses:

(1)

(2)

Copy to:

- (i) The Assistant Labour Commissioner..... (of the district concerned);
- (ii) The Deputy Labour Commissioner
(Concerned);
- (iii) The Labour Commissioner, Govt. of N.C.T. of Delhi.

(iv) The Secretary (Labour) Government of N.C.T. of Delhi.

*Where applicable.

**Delete whichever is not applicable.]

Form – E

(See Rule 34)

Notice of change of Service Condition proposed by an Employer

Name of employer.....

Address.....

Dated the day of20.....

In accordance with Section 9-A of the Industrial disputes Act, 1947, I/we hereby give notice to all concerned that it is my/our intention to effect the change /changes specified in the annexure, with effect from in the conditions of service applicable to workmen in respect of the matters specified in the Fourth Schedule to the said Act.

Signature.....

Designation.....

Annexure

(Here specify the change/changes, intended to be effected)

Copy Forwarded to:

- (1) The Secretary of registered trade union , if any;
- (2)The Assistant Labour Commissioner..... (of the district concerned);
- (3)The Deputy Labour Commissioner
.....(Concerned);
- (4)The Labour Commissioner, Govt. of N.C.T. of Delhi.

FORM G-1
(See Rules 56-A)

**Progress Report on constitution and functioning of Works Committee
for the half-year ending the 30th June/*31st
December,.....**

1. Name and address of the establishment.
2. Name of the employer.
3. (a) Number of workmen employed.
(b) Names of unions, if any.
(c) Affiliation of the union (s) to the Central Organizations of workers.
4. If the Works Committee has been functioning-
(a) Date of its constitution.
(b) Number of workmen's representative (elected members).
(c) Number of employer's representatives (nominated members).
(d) Number of meetings held during the half-year (with dates).
5. If the Works Committee had not been functioning, the difficulties encountered in its constitution/functioning.
6. General remarks, if any.

Date.....

Place.....

Signature of employer or his representatives.

FORM H

(See Rule 58)

Form for Memorandum of Settlement

Names of Parties:

Representing employer(s):

Representing workmen:

Short Recital of the Case

Terms of settlement

Signature of the parties.....

Witnesses:

(1)

.....

(2)

.....

*Signature of Conciliation Officer./Board of Conciliation

Copy to:(1)Assistant Labour Commissioner (of the district concerned)

(2) Deputy Labour Commissioner..... (of the district concerned)

(3) The Labour Commissioner Govt. of N.C.T. of Delhi.

(4) The Secretary (Labour) Govt. of N.C.T. Delhi Delhi.

* In case of settlements effected by Conciliation Officer/Board of Conciliation.

** In case where settlements are arrived at between the employer and his workmen otherwise than in the course of conciliation proceeding.

FORM I

(See Rule 59)

Before the Labour Court/Tribunal/National Tribunal

Complaint under Section 33-A of the Industrial Disputes Act, 1947.

AComplainant(s)

Versus

B Opposite Party/Parties.

Address:

In the matter of Reference No

The petitioner(s) begs/beg to complain that the Opposite Party/Parties has/have been guilty of contravention of the provisions of Section 33 of the Industrial Disputes Act, 1947 (14 of 1947), as shown below:

(Here set out briefly the particulars showing the manner in which the alleged contravention has taken place and the grounds on which the order or act of the Management is challenged.)

The complainant(s) accordingly prays/pray that the Labour Cour/Tribunal/National Tribunal may be pleased to decide the complaint set out above and pass such order or orders thereon as it may deem fit and proper.

The number of copies of the complaint and its annexures required under Rule 59 of the Industrial Disputes (Central) Rules, 1957, are submitted herewith.

Signature of the Complainant(s)

Dated thisday of20.....

Verification

I do solemnly declare that what is stated in paragraphs.....above is true to my knowledge and that what is stated in paragraphs above is stated upon information received and believed by me to be true.* This verification is signed by me atonday of20

Signature or Thumb impression
of the person verifying

*Delete, if not applicable

FORM J

(See Rule 60(1))

Before (here mention the Conciliation officer, Board, Labour Court, Tribunal or National Tribunal).

Application for permission under sub-section (1)/sub-section (3) of Section 33 of the Industrial Disputes Act, 1947 (14 of 1947), in the matter of Reference No.

Address: A Applicant;

Versus

Address(es) B Opposite Party/Parties.

The above-mentioned applicant begs to state as follows:

[Here mention the action specified in clause (a) or clause (b) of sub-section (1) grounds on which the permission is sought for.]

The applicant, therefore, prays that express permission may kindly be granted to him to take the following action namely:

[Here mention the action specified in clause (a) or clause (b) of sub-section (I)/sub-section (3) of Section 33.]

Signature of the applicant.

Dated this..... day of20.....

Space for Verification

(Signature of person verifying)

Date (on which the verification was signed)

Place (at which the verification was signed)

FORM K

(See Rule 60(2)]

Before (Here mention the Conciliation Officer, Board, Labour Court, Tribunal or National Tribunal.)

Application under sub-section (2) of Section 33 of the Industrial Disputes Act, 1947 (14 of 1947), in the matter of Reference No

.....

A Applicant Address:

Versus

B Opposite Party/Parties.

Address:

The above-mentioned applicant begs to state as follows:

(Here set out the relevant facts and circumstances of the case.)

*The workman/workmen discharged/dismissed under clause (b) of sub-section (2) of Section 33 has/have been paid wages for one month.

The applicant prays that the Conciliation Officer/Board/Labour Court/Tribunal/National Tribunal may be pleased to approve of the action taken namely:

[Here mention the action taken under clause (a) or clause (b) of sub-section (2) of Section 33.]

applicant. Signature of the

Space for Verification

verifying.) (Signature of the person

Dated this Day of20

Dated (on which the verification was signed)

Place (at which the verification was signed)

*Delete, if not applicable.

FORM K-2
[See Rule 62(1)]

**Application by a person authorised by a workman or by the assignee or
 heir of a deceased workman under sub-section (1) of
 Section 33-C of the Industrial Disputes Act, 1947**

To

- (1) The Secretary Labour Government of N.C.T. of Delhi.
- (2) The Deputy Labour Commissioner(of the district
 Concerned);

Sir.

I *Shri/Shrimati/Kumari have to state that
 *Shri/Shrimati/Kumari..... *is/was entitled to receive from
 M/s..... a sum of Rs..... on account of..... under the
 provisions of Chapter V-A/Chapter V-B of the Industrial
 Disputes Act, 1947/in terms of the award, dated the..... given by.
 /in terms of the settlement dated the..... arrived at
 between the said M/s and their workmen through..... the
 duly elected representatives.

I further state that I served the management with a demand notice by
 registered post on..... for the said amount which the management
 has neither paid nor offered to pay to me even though a fortnight has since
 elapsed. The details of the amount have been mentioned in the statement
 hereto annexed.

I request that the said sum may kindly be recovered from the
 management under sub-section (1) of Section 33-C of the Industrial
 Disputes Act, 1947, and paid to me as early as possible.

* I have been duly authorised in writing by..... (here insert the
 name of the workman) to make this application and to receive the payment
 of the aforesaid amount due to him.

* I am the assignee/heir of the deceased workman and am entitled to
 receive the payment of the aforesaid amount due to him.

Station

Date.....

Signature of the applicant

Address

.....

.....

Annexure

(Here Indicate the details of the amount claimed .)

* Strike out the portions inapplicable.

FORM K-3
[See Rule 62(2)]
Application under sub-section (2) of Section 33-C of the
Industrial Disputes Act, 1947

Before the Labour Court at..... Between

(1) Name of the applicant(s).

(2) Name of the employer.

The petitioner,..... a workman of M/s..... of..... The petitioners undersigned, workmen of..... is/are entitled to receive from the said M/s..... the money/benefits mentioned in the statement hereto annexed.

It is prayed that the Court be pleased to determine the amount/amounts due to the petitioner(s).

Signature or thumb

Address(es)

impression(s) of
the applicant(s)

1.

2.

3.

4.

Station

Date

Annexure

(Herein set out the details of the money due or the benefits accrued together with the case for their admissibility).]

FORM K-4
[See Rule 62(2)]
Application by a person who is an assignee or heir of a deceased
workman
under sub.section (2) of Section 33.C of the Industrial
Disputes Act, 1947 (14 of 1947)

Before the Labour Court at.....

(1) Name of the applicant/applicants

(2) Name of the employer

I am/We are the assignee(s) of the deceased workman and am/are entitled to make an application on his behalf.

Shri....., former workman of M/s of is entitled to receive from the said M/s..... the money/benefits mentioned in the statement hereto annexed;

It is prayed that the Court be pleased to determine the amount/amounts due to the deceased workman.

Address of workman.....

Signature or thumb impression of
the applicant(s).....

Address of the applicant (s).....

Station

Date

Annexure

(Herein set out the details of the money due or the benefits accrued together with the case for their admissibility).]

FORM K-I

(See Rule 62(1)]

Application under sub-section (1) of Section 33-C of the Industrial Disputes Act, 1947

To

- (1) The Secretary Labour Government of N.C.T. of Delhi.
 (2) The Deputy Labour Commissioner(of the district
 Concerned);

Sir,

I/We have to state that I am/we are entitled to receive from M/s A sum of Rs on account of under the provisions of Chapter V-A/Chapter V-B of the Industrial Disputes Act, 1947/in terms of the award dated the Given by/in terms of the settlement dated thearrived at between the said M/s and their workmen through the duly elected representatives.

I/We further state that I/We served the management with a demand notice by registered Post on for the said amount which the management has neither paid nor offered to pay to me/us even though a fortnight has since elapsed. The details of the amount have been mentioned in the statement hereto annexed.

I/We request that the said sum may kindly be recovered from the management under sub-section (1) of Section 33-C of the Industrial Disputes Act, 1947, and paid to me/us as early as possible.

Signature of applicant(s)

Address(es)

- 1.
- 2.
- 3.
- 4.

Station

Date

Annexure

[Here indicates the details of the amounts (s) claimed .]

FORM L
(See Rule 71)
Form of Notice of Strike to be given by Union/Workmen
in a Public Utility Service
(Name of Union)

Name of five elected representatives of workmen.

Dated the day of 20.....

To

(The name of the employer).

Dear Sir/Sirs,

In accordance with the provisions contained in sub-section (1) of Section 22 of the Industrial Disputes Act, 1947

I/We hereby give you notice that I propose to call a strike/we propose to go on strike on20.... for the reasons explained in the Annexure.

Secretary of the Union

Yours faithfully,

Five representatives of the workmen duly elected at a meeting held on.(dated), vide resolution attached.]

Annexure

Statement of the case.

Copy to: (1) Assistant Labour Commissioner (of the district concerned);
 (2) Deputy Labour Commissioner (Concerned)
 (3) The Labour Commissioner, Govt. of N.C.T. of Delhi.

FORM M
(See Rule 72)
Form of Notice of Lock-out to be given by an Employer carrying
on a Public Utility Service

Name-of employer.....

Address.....

Dated the..... day of20.....

In accordance with the provisions of sub-section (2) of Section 22 of the Industrial Disputes Act, 1947, I/we hereby give notice to all concerned that it is my/our intention to effect a lock-out, in..... department(s), section(s), of my/our establishment with effect from..... for the reasons explained in the annexure.

Signature.....

Designation.....

Annexure

Statement of Reasons

Copy Forwarded to ;

- (1) The Secretary of the Registered Union, if any.
- (2) Assistant Labour Commissioner (of the district concerned);
- (3) Deputy Labour Commissioner (Concerned)
- (4) The Labour Commissioner, Govt. of N.C.T. of Delhi.

FORM O-2
(See Rule 75-A)

To,
The Deputy Labour Commissioner (of the district concerned),
.....

Sir,
As required by Rule 75-A of the Industrial Disputes (Central) Rules,
1957 and
in continuation of my/our notice dated+..... in Form O-1 I/we
hereby inform you that the lay-off in my/our establishment has ended on
+.....

Yours faithfully,
Copy to the Assistant Labour Commissioner (of the district concerned)

+ Here insert the date.
++Here insert the position which the person who signs the letters held
with the
employer issuing the letter.

FORM O-3

(To be submitted in triplicate)

[See Rule 75-B(1)]

**Form of application for permission to lay-off, to continue the lay-off
of workmen in industrial establishments to which provisions of
Chapter V-B of the Industrial Disputes Act, 1947
(14 of 1947) apply**

To,

.....

.....

.....

[The authority specified under sub-section (I) of Section 25-M]

Sir,

Under *sub-section (1)/sub-section [(3)] of Section 25-M of the Industrial Disputes Act, 1947 (14 of 1947) read with sub-rule (1) of Rule 75-B of the Industrial Disputes (Central) Rules, 1957 I/we hereby apply for * permission to the lay-off/per-
mission to continue the lay-off ofworkmen of a total of..... workmen employed in my/our establishment with effect from.....for the reasons set out in the Annexure.

Permission is solicited *for the lay-off/to continue the lay-off of the said workmen.

Such of the workmen permitted to be laid-off will be paid such compensation , if any , to which they are entitled under sub-section [(6)] of Section 25-M read with Section 25-C of the Industrial Disputes Act, 1947 (14 of 1947).

Yours faithfully
(Signature)

*Strike out whatever is inapplicable.

Annexure

(Please give the replies against each item)

Item No.

1. Name of the undertaking with complete postal address, including telegraphic address and telephone number.

- 2 Status of undertaking :-
 - (i) Whether central Public Sector/state Public Sector/ Foreign majority company/joint sector, etc.

 - (ii) if belongs to large industrial house, please indicate the controlling group; and if a foreign majority company, indicate the extent of foreign holdings.

 - (iii) Whether the undertaking is licensed/registered and if so , name of licensing/registration authority and license/registration certificate numbers.

3. (a) *Names and addresses of the affected workmen proposed to be laid-off/names and addresses of the workmen laid-off before the commencement of the

industrial disputes (Amendment)
Act, 1976 (32 of 1976) and the
Dates from which each of them
has been laid-off.

- (b) The nature of the duties of the
workmen referred to in sub-item
(a), the units/sections/shops
where they are or were working
and the wages drawn by them.

4. Item of manufacture and
scheduled industry/industries
under which they fall.

5. Details relating to installed capacity.
Licensed capacity and utilized capacity .

6 (i) Annual production , item wise,
for preceding three years .

(ii) production figures, month-wise,
for the preceding twelve months

7. work in progress , item wise and
value wise .

8 Any arrangements regarding
offloading or sub-contracting of pro-
ducts or any components thereof.

9. Position of the order book-item-
wise and value-wise for a period
of six months, and one year next
following, and for the period after
the expiry of the said one year.

10. Number of working day in a week
with the number of shifts per day
and the strength of workmen per
each shift.

11. Balance sheets, profit and loss ac-
counts and audit reports for the last
three years.

12. Financial position of the company.

13. Names of the inter-connected com-

panies or companies under the same management.

14. (i) The total number of workmen (category-wise), and the number of employees other than workmen as defined under the Industrial Disputes Act, 1947 (14 of 1947), employed in the undertaking.
- (ii) Percentage of wages of workmen to the total cost of production.
15. Administrative, general and selling cost in absolute terms per year in the last three years and percentage thereof to the total cost.
16. Details of lay-offs resorted to in the last three years (other than the lay-off for which permission is sought), including the periods of such lay-offs, the number of workmen involved in each such lay-off and the reasons therefore.
17. Anticipated savings due to the *proposed lay-off/lay-off for the continuance of which permission is sought.
18. Any proposal for effecting savings on account of reduction in-
 - (i) managerial remuneration,
 - (ii) sales promotion cost, and
 - (iii) general administration expenses.
19. Position of stocks on last day of each of the months in the preceding twelve months.
20. Annual sales figures for the last three years and month-wise sales figures for the preceding twelve months both item-wise and value-wise.
21. Reasons for the *proposed lay-off/lay-off the continuance of which permission is sought.

22. Any specific attempts made so far to avoid the *proposed lay-off/lay-off for the continuance of which permission is sought.

23. Any other relevant factors with details thereof.

* Strike out what ever is applicable

FORM P-A
(To be made in triplicate)
(See Rule 76-A(1))

Form of notice for permission for retrenchment of workmen to be given by an employer under clause [(d)J of sub-section (1) of Section 25-N of the Industrial Disputes Act, 1947 (14 of 1947)]

To,

.....
.....
.....

Date

[The Government/authority* specified under clause (b) of sub-section (1) of Section 25-N].

Sir,

Under clause (b) of sub-section (1) of Section 25-N of the Industrial Disputes Act 1947 (14 of 1947), I/we hereby inform you that *I/we propose to retrench. ...workmen [being workmen to whom sub-section (I) of Section 25-N applies] with effect from..... for the reasons set out in the Annexure.

2. The workmen* concerned have been given notice in writing as required under clause (a) of sub-section (I) of Section 25-N/have not been given notice since the retrenchment is under an agreement (copy of which is enclosed) as provided in the proviso to the said clause.

3. The total number of workmen employed in the industrial establishment is and the total number of those who will be affected by the proposed retrenchment is as given below:

Category and designation of workmen to be retrenched	<u>Number of workmen</u>	
	Employed retrenched	To be
(1)	(2)	(3)

4. Permission is solicited for the proposed retrenchment under clause (b) of sub-section (I) of Section 25-N.

5. I/We hereby declare that the workmen permitted to be retrenched will be paid compensation due to them under clause (b) of sub-section (I) of Section 25-N of the Act.

Yours faithfully,
(Signature).

* Strike out whatever is inapplicable

ANNEXURE

(Please give replies against each item)

Item No.

- 1 . Name of the undertaking with complete postal address, including telegraphic addresses and telephone number.
2. Status of undertaking:-
 - (i) Whether Central public sector/State public sector/foreign majority company/joint sector, etc.
 - (ii) If belongs to large industrial House, please indicate the controlling group; and if a foreign Majority company, indicate the Extent of foreign holdings.
 - (iii) Whether the undertaking is licensed/registered and if so,

name of licensing/registration authority and licence/ registration certificate numbers.

3. Names and addresses of the workmen proposed to be retrenched and the nature of their duties, the units/sections/shops where they are working and the wages drawn by them.
4. Items of manufacture and sheduled industry/industries under which they fall.
5. Details relating to installed capacity, licensed capacity and the utilised capacity.

- 6.(i) Annual production, item-wise for preceding three years.
- (ii) Production figures month-wise for the preceding twelve months.
7. Work in progress –item –wise and value wise.
8. Any arrangements regarding off-loading or sub-contracting of products or any components thereof.
9. Position of the order book-itemwise and value wise-for a period of six months and one year next following, and for the period after the expiry of the said one year.
10. Number of working days in a week with number of shifts per day and strength of workmen per each shift.
11. Balance sheet , profit and loss account and audits reports for the last three years .
12. financial position of the company .
13. Name of the inter connected companies or companies under the same management.
14. (i) The total numbers of workmen (category-wise), and the number of employees other than workmen as defined in the industrial disputes Act 1947 (14 of 1947), employ in the under taking
ii) Percentage of wages of workmen to the total cost of production
15. Administrative, general and selling cost in absolute terms per year for the last three years and percentage thereof to the total cost.
16. Details of retrenchment resorted to in the last three years, including dates of retrenchment, the number of workmen involved in each case, and the reasons therefore.
17. Has any of the retrenched workmen been given re-employment and if so, when? Give details.
18. Are seniority lists maintained in respect of the categories of workmen proposed to be retrenched and if so, the details and the position of the workmen affected indicating their length of service including broken periods of service?
19. anticipated savings due to the proposed retrenchment.
20. Any proposal for effecting savings on account of reduction in –

- (i) managerial remuneration.
 - (ii) sales promotion cost, and
 - (iii) general administration expenses.
21. Position of stocks on the last day of each of the months in the preceding twelve months.
22. Annual sales figures for the last three years and month-wise sales figures-for the preceding twelve months both item-wise and value-wise.
23. Reasons for the proposed retrenchment.
24. Any specific attempt made so far to avoid the proposed retrenchment.
25. Any other relevant factors with details thereof.

FORM P
(See Rule 76)

Form of Notice of Retrenchment to be given by an employer under
clause (c) of Section 25-F of Industrial Disputes Act, 1947

Name of employer Address
.....

..... Dated the Day of 20
.....

To

The Secretary (Labour),
Govt. of N.C.T. of Delhi.

Sir,

Under clause (c) of Section 25-F of the Industrial Disputes Act, 1947 (14 of 1947), I/We hereby inform you that I/we have decided to retrench* workmen with effect from** for the reason explained in the Annexure.

2. +The workmen concerned were given on the ** 20 One month's notice in writing as required under clause (a) of Section 25-F of that Act. Retrenchment is being effected in pursuance of an agreement, a copy of which is enclosed. The workmen were given on the ** 20 one month's pay in lieu of notice as required under clause (a) of Section 25-F of that Act.

3. The total no. of workmen employed in the industrial establishment is *** and the total number of those who will be affected by the retrenchment is given below:

Category and designation of workmen to be retrenched	Number of workmen	
	Employed	To be Retrenched
(1)	(2)	(3)

4. I/We hereby declare that the workman/workmen concerned has/have been/will be paid compensation due to them under Section 25-F of the Act on **/ the expiry of the notice period.

Yours faithfully
++

* Here insert the number of workmen.

** Here insert the date.

+Delete the portion which is not applicable.

***Here insert the total number of workmen employed in the industrial establishment.

++*Here insert the position which the person who signs this letter holds with the employer issuing the letter.*

ANNEXURE
Statement of Reasons

Copy to: (1) Assistant Labour Commissioner (of the district concerned)
(2) Deputy Labour Commissioner (concerned).
(3) Employment Officer, Employment Exchange (concerned)

FORM Q
(See Rule 76-A)

*Form of notice of closure to be given by an employer under Section 25-FFA
of the Industrial Disputes Act, 1947*

Name of employer
Address
Dated the Day of 20

To
The Secretary (Labour),
Govt. of N.C.T. of Delhi

Sir,
Under Section 25-FFA of the Industrial Disputes Act, 1947 (14 of 1947), I/we hereby inform you that I/we have decided to close down (name of the undertaking) with effect from for the reasons explained in the Annexure. The number of workmen whose services would be terminated on account of the closure of the undertaking is (number of workmen).

Yours faithfully,

+(Here insert the position which the person who signs this letter holds with the employer issuing this letter).

ANNEXURE
Statement of reasons

Copy to: -

- (1) The Deputy Labour Commissioner (of the concerned district)*
- (2) The Assistant Labour Commissioner (Concerned) *
- (3) The Employment Exchange *

*Here enter the office address of the Regional Labour Commissioner (Central)/Assistant Labour Commissioner (Central) and the Employment Exchange in the local area concerned]

FORM Q-A
(To be submitted in triplicate)
[See Rule 76-C(1)]
Form of notice for permission of closure to be given by an employer
under
sub-section (I) of Section 25-0 of the Industrial Disputes Act, 1947
(14 of 1947)

Date

To,

The Secretary (Labour),
Govt. of N.C.T. of Delhi.

Sir.

Under Section 25-C of the Industrial Disputes Act, 1947 (14 of 1947), I/we hereby inform you that I/we propose to close down the undertaking specified below of (name of the industrial establishment)
(Give details of the undertaking)

.....

.....

with effect from..... for the reasons explained in the Annexure. 2. The number of workmen whose services will be terminated on account of the closure of the undertaking is..... (number of workmen).

3. Permission is solicited for the proposed closure.

4. I/we hereby declare that in the event of approval for the closure being granted, every workman in the undertaking to whom sub-section (8) of the said Section 25-0 applies shall be paid compensation as specified in that section.]

Yours faithfully,

(Signature)

ANNEXURE

(Please give replies against each item)

Item No.

1. Name of the industrial establishment with complete postal address, including telegraphic addresses and telephone number.
2. Status of undertaking –
 - (i) Whether Central public sector/ State public sector/ foreign majority company/ joint sector, etc.
 - (ii) If belongs to large industrial house, please indicate the controlling group; and if a foreign majority company, indicate the extent of foreign holdings.
 - (iii) Whether the undertaking is licensed/ registered and if so, authority and licensing/ registration certificate numbers.
3. The total number and categories of workmen affected by the proposed closure along with the addresses wages drawn by them.
4. Items of manufacture and scheduled industry/industries under which they fall.
5. Details relating to licensed capacity , installed capacity and the utilized capacity.
6. (i) Annual production item-wise for preceding three years.
(ii) Production figures month-wise for the preceding twelve months.
7. Work in progress – item-wise and value-wise.
8. Any arrangement regarding off-loading or sub-contracting of products or any component thereof.
9. Details of persons or the organizations to whom the job/jobs is/are being entrusted – relationship/interest of the persons/organizations with the director/directors or the officer/officers of the company.
10. Position of the order book – item-wise and value-wise for a period of six months and one year next following, and for the period after the expiry of the said one-year.
11. Number of working days in a week with

the number of shifts per day and the strength of workmen per each shift.

12. Balance-sheet and profit and loss account and audit reports for the last three years.
13. Financial position of the company.
14. (i) Names of interconnected company or companies under the same management.
(ii) Details about intercorporate investments and changes during the last one year.
(iii) Interest of any of the directors/officers of the undertaking producing same or similar type of product.
15. Percentage of wages of workmen to the total cost of production.
16. Administrative, general and selling cost in absolute terms per year for the last three years and percentage thereof to the total cost.
17. Inventory position-item-wise and value-wise for the preceding twelve months (inventories to be shown in respect of finished products, components and raw-materials to be shown separately item-wise and value-wise).
18. Selling arrangement for the last three years and any change in the selling arrangement in preceding twelve months.
19. Full details of the interests of the directors and officers of the company in the organizations /persons involved in selling products of the undertaking.
20. Buying arrangements for raw materials and components.
21. Interests of the directors and officers with the organizations/persons involved in buying raw materials and components for the undertaking.
22. Annual sales figures for the three years and month-wise sales figures for the preceding twelve months both item-wise and value-wise.
23. Reasons for the proposed closure.
24. Any specific attempts made so far to avoid the closure.
25. Any other relevant factors with details thereof

FORM M
(SEE RULE 16)

Employment, Dismissal, Payment of Bonus, etc., for Women for the year ending on
31st December.....

1. Establishment
2. Aggregate number of women permanently or temporarily employed during the year
3. Number of women who worked for a period of not less than one hundred & Sixty days. in the twelve months immediately preceding the date of delivery
4. Number of women who gave notice under Sec. 6
5. Number of women who were granted permission to be absent on receipt of notice of confinement
6. Number of claims maternity benefit paid.
7. Number of claims for maternity benefit rejected
8. Number of cases where pre-natal, confinement postal care was provided by the management free of charge (Section 8)
9. Number of claims for medical bonus paid (Sec. 8)
10. Number of claims for medical bonus rejected
11. Number of cases in which leave for miscarriage was granted
12. Number of cases in which leave for miscarriage was applied for but was rejected
13. Number of cases in which additional leave for illness under section 10 was granted
14. Number of cases in which additional leave for illness under section 10 was applied for but was rejected.
15. Number of women who died
 - (a) before delivery
 - (b) after delivery
16. Number of cases in which payment was made to persons other than the women concerned
17. Number of women discharged or dismissed while working
18. Number of women deprived of maternity benefit and or medical bonus under proviso to subsection (2) of Section 12.
19. Number of cases in which payment was made on the order of the Competent Authority or inspector
20. Remarks
21. Full particulars of each case and reasons for the action taken under serial 7,

10, 14, 17 and 18 should be given in the Appendix below.

FORM A
(See Rule 3)

Form of application for the reference of an Industrial Dispute to a Board of Conciliation/ Court of Enquiry/ Labour Court/ Tribunal/ National Tribunal under Section 10(2) of the Industrial Disputes Act, 1947

Whereas an industrial dispute

- ❖ Is apprehended/exists
Between.....and.....and it is expedient that
- ❖ The dispute/investigation and settlement/the matters specified in the enclosed statement which are connected with or relevant to the dispute should be referred for
- ❖ Enquiry/adjudication
By
A Board of Conciliation/a Court of Enquiry/a Labour Court/a Tribunal/a National Tribunal
An application is hereby made under sub-section(2) of Section 10 of the Industrial Disputes Act, 1947, that the
- ❖ Said matters/said dispute
Should be referred to
- ❖ A Board of Conciliation/a Court of Enquiry/a Labour Court/a Tribunal/a National Tribunal.

This application is made by the undersigned who have/has been duly authorised to do so by virtue of a resolution (copy enclosed) adopted by a majority of the members present at a meeting of theheld on the 20.....

A statement giving the particulars required under Rule 3 of the Industrial Disputes (Central) Rules, 1957, is attached.

Dated the

Signature of
employer**

Or agent.....
Or manager.....
Or principal officer of

.....

The Corporation.....
Signature of the
President of the trade

union**

union.....
Secretary of the trade

Or

enclosed)...
**Signature of five representatives
duly authorised (vide resolution

or

**Signature of workman.....

or

**Signature of the workman in the same
establishment duly authorised (vide
authorization enclosed).....

-2-

To

The Secretary Labour, GNCT of Delhi,

Statement required under Rule 3 of the Industrial Disputes (Central) Rules, 1957, to accompany the form of application prescribed under sub-section (2) of Section 10 of the Industrial Disputes Act, 1947:

- (b) Parties to the dispute including the name and address of the establishment or undertaking involved;
- (c) Specific matters in dispute;
- (d) Total number of workmen employed in the undertaking affected;
- (e) Estimated number of workmen affected or likely to be affected by the dispute;
- (f) Efforts made by the parties themselves to adjust the dispute.

Copy to-

- (i) The Assistant Labour Commissioner..... (of the district concerned);
- (ii) The Deputy Labour Commissioner
.....(Concerned);
- (iii) The Labour Commissioner, Govt. of N.C.T. of Delhi.

**Delete whichever is not applicable.

FORM F
[See rule 20]
APPLICATION FOR COMPENSATION BY WORKMAN

To

The Commissioner for Workmen's Compensation,

residing at.....
applicant,

versus

..... residing at.....
 opposite party.

It is hereby submitted that -

(1) the applicant, a workman employed by (a contractor with) the opposite party on theday of..... 20....., received personal injury by accident arising out of and in the course of his employment.

The cause of the injury was (here insert briefly in ordinary language the cause of the injury)

.....

(2) the applicant sustained the following injuries, namely -

.....

(3) the monthly wages of the applicant amounts to Rs..... the applicant is over / under the age of 15 years.

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

(b) Notice was served as soon as practicable.

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

.....

(5) the applicant is accordingly entitled to receive -

(a) half-monthly payment of Rs. form the..... day of
20.....to.....

(b) a lump sum payment of Rs.

(6) the applicant has taken the following steps to secure a settlement by agreement,
namely but it has proved impossible to settle the questions in dispute
because
.....

* You are therefore requested to determine the following questions in dispute,
namely -

- (a) whether the applicant is a workman within the meaning of the Act ;
- (b) whether the accident arose out of or in the course of the applicant's
employment;
- (c) whether the amount of compensation claimed is due, or any part of that
amount;
- (d) whether the opposition party is liable to pay such compensation as is due ;
- (e) etc. (as required) .

Dated..... 20.....

Applicant

***Strike out the clauses which are not applicable.**

FORM 'G'*[See sub-rule (3) of rule 6]***Fresh Nomination***To*

.....

[Give here name or description of the establishment with full Address]

I, Shri/Shrimati [Name in full here] whose particulars are given in the statement below, have acquired a family within the meaning of clause (h) of section (2) of the Payment of Gratuity Act, 1972 with effect from the [date here] in the manner indicated below and therefor nominate afresh the person(s) mentioned below to receive the gratuity payable after my death as also the gratuity standing to my credit in the event of my death before that amount has become payable, or having become payable has not been paid direct that the said amount of gratuity shall be paid in proportion indicated against the name(s) of the nominee(s).

2. I hereby certify the person(s) nominated is a/are member(s) of my family within the meaning of clause (h) of section 2 of the said Act.

3.

(a) My father/mother/parents is/are not dependant on me.

(b) My husband's father/mother/parents is/are not dependant on my husband.

4. I have excluded my husband from my family by a notice dated the to the controlling authority in terms of the proviso to clause (h) of section 2 of the said Act.

Nominee(s)

<i>Name in full with full address of nominee(s)</i>	<i>Relationship with the employee</i>	<i>Age of nominee</i>	<i>Proportion by which the gratuity will be shared</i>
1.			
2.			
3.			
4.			
so on.			

Manner of acquiring a "family"

[Here give details as to how a family was acquired, i.e., whether by marriage or parents being rendered dependant or through other process like adoption].

Statement

1. *Name of the employee in full.*
2. *Sex.*
3. *Religion.*
4. *Whether unmarried/married/widow/widower.*
5. *Department/Branch/Section where employed.*
6. *Post held with Ticket No. or Serial No., if any.*
7. *Date of appointment.*
8. *Permanent address.*

*Village Thana Sub-division Post Office
.....*

District State

Place

Signature/Thumb impression

Date

of the employee.

Declaration by witnesses

Fresh nomination signed/thumb impressed before me.

Name in full and full addresses of witnesses.

Signature of witnesses.

1.

1.

2.

2.

Place

Date

Certificate by the employer

Certified that the particulars of the above nomination have been verified and recorded in this establishment.

Employer's reference No., if any.

*Signature of the employer/
officer authorised
Designation*

Date

*Name and address of the
establishment or rubber
stamp thereof.*

Acknowledgement by the employee

*Received the duplicate copy of the nomination in Form filed by me on
..... duly certified by the employer.*

Date

Signature of the employer

FORM 'H'

[See sub-rule (4) of rule 6]

Modification or nomination

To

.....
[Give here name or description of the establishment with full address]

*I, Shri/Shrimati/Kumari [Name in full here] whose particulars are given
in the statement below, hereby give notice that the nomination filed by me on [date] and
recorded under
your reference No..... dated shall stand modified in the following
manner:*

[Here give details of the modifications intended]

Statement

1. *Name of the employee in full.*
2. *Sex.*
3. *Religion.*
4. *Whether unmarried/married/widow/widower.*
5. *Department/Branch/Section where employed.*
6. *Post held with Ticket No. or Serial No., if any.*
7. *Date of Appointment.*
8. *Address in full.*

*Place
Date*

*Signature/Thumb impression
of the employee*

Declaration by witnesses

Certified that the above modification have been recorded.

Employer's reference No., if any.

*Signature of the employer/
Officer authorised
Designation
Name and address of the
Establishment or rubber
Stamp thereof.*

Acknowledgement by the employee

*Received the duplicate copy of the notice for modification in Form 'H' filed by me on
.....
Duly certified by the employer.*

Date

Signature of the employee

Note: *Strike out the worlds not applicable.*

FORM 'I'

*[See sub-rule (1) of rule 7]
Application of gratuity by an employee*

To

.....
.....

[Give here name or description of the establishment with full address]

Sir/Gentlemen,

I beg to apply for payment of gratuity to which I am entitled under sub-section (1) of section 4 of the Payment of Gratuity Act, 1972 on account of my superannuation/retirement/resignation after completion of not less than five years of continuous service/ total disablement due to accident/ total disablement due to disease with effect from the Necessary particulars relating to my appointment in the establishment are given in the statement below:

Statement

1. *Name in full.*
2. *Address in full*
3. *Department/Branch/Section where last employed.*
4. *Post held with Ticket No. or Serial No., if any.*
5. *Date of appointment.*
6. *Date cause of termination of service.*
7. *Total period of service.*
8. *Amount of wages last claimed.*

9. *Amount of gratuity claimend.*

I was rendered totally disabled as a result of

[Here give Detail of the nature of disease or accident]

Payment may please be made in cash/open or crossed bank Cheque.

As the amount of gratuity payable is less than Rupees one thousand, I shall request you to arrange for payment of the sum to me by Postal Money Order at the address mentioned above after deducting postal money order commission therefrom.

*Place
Date*

*Yours faithfully,
Signature/Thumb impression of
the applicant employee.*

Note:

- 1. Strike out words not applicable.*
- 2. Strike out paragraph or paragraph not applicable.*