

**Form XXIV
(See rule 82(1))**

Return to be sent by the contractor to the Licensing Officer

Half year ending June.2014.

1. Name and address of the contractor : **Ghibellines Security Solutions Ltd.
A-29, Site-IV, Industrial Area,
Sahibabad, Ghaziabad,U.P.**
2. Name and address of establishment : **Max Healthcare Pvt. Ltd.
FC-50,C &D Block
Shalimar Bagh, New Delhi.**
3. Name and address of the principal Employer : **Max Healthcare Pvt. Ltd.
FC-50, C & D Block
Shalimar Bagh, New Delhi.**
4. Duration of contract from : **01/04/2014 TO 31/03/2015.**
5. No. of days during the half year on Which-----
 - (a) The establishment of the principal Employer had work : **181 Days**
 - (b) The contractor's establishment Had worked. : **181 Days**
6. Maximum number of contract labour Employed on any day during the half Year :

Men	Women	Children	Total
37	08	Nil	=45
7. (I) Daily hours of work and spread over : **8 Hrs.**
(II) (a) Whether weekly holiday Observed and on what day : **Yes**
(c) If so, whether it was paid for : **Staged weekly off on 7th days.**
(III) No. of man hours of over time Worked : :
8. Number of Man days worked by :

<u>Men</u>	<u>Women</u>	<u>Children</u>	<u>Total</u>
6017	1263	Nil	= 7280
9. Amount of wages paid :

<u>Men</u>	<u>Women</u>	<u>Children</u>	<u>Total</u>
1910435	402062	Nil	=2312497

OF I.E.SAHIBABAD (201010)
EU645910201IN
Counter No:1,CP-Code:001
To: LICENCE OFFICER,
DELHI, PIN:110001
From: GHIPELLINES, SEO
Wt: 20grams,
Amt: 17.00, 12/09/2014, 11:27
Taxes: Rs. 2.00 (Track on www.indiapost.gov.in)

10. Amount of deductions from wages	:	Men	Women	Children	Total
If any :-	(PF)	229252	48247	Nil	=277500
	(ESI)	33433	7036	Nil	=40469

Total: : **262685 55284 Nil =317969**

11. Whether the following have been provided-

- | | | |
|--------------------|---|--------------------------------|
| (a) Canteen | : | Provided by Principal Employer |
| (b) Rest Rooms | : | Do |
| (c) Drinking water | : | Do |
| (d) Craches | : | Do |
| (e) First Aid | : | Do |

(If the answer is "Yes" state briefly standards provided)

Place :- *Ghaziabad.*

For Ghibellines Security Solutions Ltd.

Date :- *7-7-2014*

(Authorized Signatory)

