REGISTER OF ADVANCE

FORM XXII

SEE RULE 78 (1)(A)(II)

NAME AND ADDRESS OF CONTRACTOR

Nimbus Harbor Facilities Management Pvt. Ltd.H 305, Sushant Shopping Arcade, Sushant Lok I, Gurgaon,HR

NATURE AND LOCATION OF WORK

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF ESTABLISHMENT IN/WHICH CONTRACT IS CARRIED ON

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF PRINCIPAL EMPLOYER

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

SERIAL NO	NAME OF WORKMEN	FATHER'S/ MOTHER'S NAME/ HUSBAND NAME	DESIGNATION/ NATURE OF EMPLOYEMENT	WAGE PERIOD AND WAGES PAYABLE	DATE AND AMOUNT OF ADVANCE GIVEN	PURPOSE FOR WHICH ADVANCE MADE	NO. OF INSTALLMENT BY WHICH ADVANCE TO BE PAID	DATE AND AMOUNT OF EACH INSTALLMENT REPAID	DATE ON WHICH LOAN INSTALLMENT REPAID	REMARKS
NO ADVANCE PAID TO ANY EMPLOYEE'S DURING THE MONTH OF MAY-2021										

NIMBUS HARBOR FACILITIES MANAGEMENT PVT. LTD. GURGAON

REGISTER OF ACCIDENT BOOK

FORM 11

Regulation 66

NAME AND ADDRESS OF CONTRACTOR

Nimbus Harbor Facilities Management Pvt. Ltd.H 305, Sushant Shopping Arcade, Sushant Lok I, Gurgaon,HR

NATURE AND LOCATION OF WORK

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF ESTABLISHMENT IN/WHICH CONTRACT IS CARRIED ON

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF PRINCIPAL EMPLOYER

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

Serial No	Date of notice	Time of notice	Name and address of the injured person	Sex	Age	Insurance No	Shift, department and occupation of employee	Injury	Date	Time	Place	Cause of injury	Nature of injury	What exactly was the injured person doing at the time of injury	Name, occupation, address and signature or the thumb impression of the persons giving notice	Signature and designation of the person who makes the entry	Name, address and occupation of two witnesses	Remarks, if any
NO ACCIDENT OCCURED DURING THE MONTH OF MAY-2021																		

NIMBUS HARBOR FACILITIES MANAGEMENT PVT. LTD. GURGAON

REGISTER OF FINES

FORM XXI

SEE RULE 78 (1)(A)(II)

NAME AND ADDRESS OF CONTRACTOR

Nimbus Harbor Facilities Management Pvt. Ltd.H 305, Sushant Shopping Arcade, Sushant Lok I, Gurgaon,HR

NAME AND ADDRESS OF ESTABLISHMENT IN/WHICH CONTRACT IS CARRIED ON

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NATURE AND LOCATION OF WORK

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF PRINCIPAL EMPLOYER

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

S. No	Name	Father's/ Husband's Name	Sex	Department	Nature and date of the offence for which fine imposed	Whether workman showed cause against fine or not, if so enter	Rate of Wages	Date and amount of fine imposed	Date on which fine realised	Remarks
NO FINES HAVE BEEN IMPOSED DURING THE MONTH OF MAY-2021										

NIMBUS HARBOR FACILITIES MANAGEMENT PVT. LTD. GURGAON

OVERTIME REGISTER

FORM XXIII

SEE RULE 78 (1)(A)(III)

NAME AND ADDRESS OF CONTRACTOR

Nimbus Harbor Facilities Management Pvt. Ltd.H 305, Sushant Shopping Arcade, Sushant Lok I, Gurgaon,HR

NAME AND ADDRESS OF ESTABLISHMENT IN/WHICH CONTRACT IS CARRIED ON

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NATURE AND LOCATION OF WORK

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF PRINCIPAL EMPLOYER

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

BSES RAJDHANI POWER LTD.	Name	Father's/ Husband's Name	Sex	Designation and Department	Date on which overtime worked	BSES RAJDHANI POWER LTD. BSES BHAWAN,	Total overtime worked or production	Normal Hours	Normal rate	Overtime rate	Normal earning	Overtime earning	Total earning	Date on whch overtime payment made	Remarks
NO OVERTIME PAID TO ANY EMPLOYEE'S DURING THE MONTH OF MAY-2021															

NIMBUS HARBOR FACILITIES MANAGEMENT PVT. LTD. GURGAON

REGISTER OF DEDUCTIONS FOR DAMAGE OR LOSS

FORM XX

SEE RULE 78 (1)(A)(II)

NAME AND ADDRESS OF CONTRACTOR

Nimbus Harbor Facilities Management Pvt. Ltd.H 305, Sushant Shopping Arcade, Sushant Lok I, Gurgaon,HR

NATURE AND LOCATION OF WORK

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF ESTABLISHMENT IN/WHICH CONTRACT IS CARRIED ON

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

NAME AND ADDRESS OF PRINCIPAL EMPLOYER

The British School Society, Dr.Jose P. Rizal Marg, Chanakyapuri, New Delhi-110021

S. No	Name	Father's/ Husband's Name	Sex	Department	Damage or loss caused with date	Whether worker showed cause against deductions,if	Date and amount of deductions imposed	Date and amount of fine imposed	Date on which fine realised	Remarks

NO DAMAGE OR LOSS DURING THE MONTH OF MAY-2021

NIMBUS HARBOR FACILITIES MANAGEMENT PVT. LTD. GURGAON