

**FORM – XXIV**  
[See rule 66(1)]

Return to be submitted by the Contractor to the Licensing Officer.

Half Year ending 30<sup>th</sup> June, 20.....

1. Name and address of the Contractor.....
2. Name and address of the establishment.....  
.....
3. Name and address of the Principal Employer.....  
.....
4. Duration of Contract : From..... to.....
5. No. of days during the half year on which
  - (a) the establishment of the principal employer had worked.....
  - (b) the contractor's establishment had worked.....
6. Maximum number of contract labour employed on any day during the half year:

Men	Women	Children	Total
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7. (a) Daily hours of work and spread over: .....
- (b) (a) Whether weekly holidays observed and on what day: .....
- (b) If so, whether it was paid for : .....
- (c) No. of man-hours of overtime worked: .....
8. Number of man-days worked by :

Men	Women	Children	Total
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9. Amount of wages paid :

Men	Women	Children	Total
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10. Amount of deduction from wages, if any:

Men	Women	Children	Total
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11. Whether the following have been provided:
  - (i) Canteen
  - (ii) Rest Rooms
  - (iii) Drinking Water
  - (iv) Creches
  - (v) First Aid

(If the answer is 'yes' state briefly standard provided)

Place: .....

Date: .....

Name and Signature of Contractor