Agartala, Thursday, August 12, 1971 A.D.

PART I- Orders & Notifications by the
Government of Tripura, The High Court,
Government Treasury etc.

Governme
nt of
Tripura
Departme
nt of
Labour

No. F. 9 (8)/LAB(Estt)/71 Dated, Agartala, the 19th July, 1971

NOTIFICATION

In exercise of the powers conferred by section 28 of the Maternity benefit Act. 1961. The Lt. Governor is pleased to make the following rules, the same having been previously published as required by sub-section (1) of Section 28 of the said Act.

By order of
the Lt.
Governor,
A.
DATTA

Secretary,
Government
of Tripura

THE TRIPURA MATERNITY BENEFIT RULES. 1971.

1.SHORT TITLE AND COMMENCEMENT – (1) These rules may be called the Tripura Maternity Benefit Rule. 1971.

(2)They shall come into force on the 1st day August, 1971.

2.DEFINITIONS- In these rules, unless the context otherwise requires, -

(a). ―the Act‖ means the Maternity Benefit Act, 1961 (Act 53 of 1961);

(b) ―Competent Authority‖ means the person or persons as may be appointed by the State Government under sub-rule (1) of rule 7;

(c) ―form‖ means a form appended to these rules;

(d) ―master roll‖ means a master roll maintained under rule 3,

(e) ―register Medical practitioner‖ means a medical practitioner whose name has been enrolled in a register maintained under any law for the time being in force regulating the registration of Practitioners of medicine.

(f) ―section‖ means a section of the Act;

(g) all other words and expressions used hereinafter but not defined therein shall have the same meaning as respectively assigned to them in the Act.

3.MUSTER ROLL- (1) The employer of every establishment in which women are employed shall prepare and maintain a muster roll in form-A and shall enter therein particulars of all women workers in the establishment.

(2) All entries in the muster roll shall be made in ink and maintained upto date and it shall always be available for inspection by the Inspector during working hours.

(3) The employer may enter in the muster roll such other particulars as may be required for any other purpose of the Act.

4. PROOF.- (1) The fact that a woman is pregnant or has been delivered of a child or has undergone miscarriage or is suffering from illness arising out of pregnancy, delivery, premature birth of child or miscarriage shall be proved by the production of a certificate to that effect from-

(a) a Medical Officer of a hospital or a dispensary, or

(b) a registered Medical Practitioner.

The certificate shall be in form B.

(2) The fact that a woman has been confined may also be proved by the production of a certified extract from a birth register maintained under the provisions of any law for the time being in force or a certificate signed by a registered midwife.

(3) The fact that a woman has undergone miscarriage may also be proved by the production of a certificate signed by a registered midwife.

(4) The fact of death of a woman or a child may be proved by the production of a certificate to that effect in

form C from any of the authorities referred to in sub-rule (1) or by the production of a certified extract from a death register maintained under the provisions of any law for the time being in force.

form D.

5. PAYMENT OF MATERNITY AND OTHER BENEFIT.- (1) A women employed in an establishment and entitled benefit shall give notice to her employer in form E and the employer shall make payment of the maternity benefit and other amount due under the Act to the women concerned, or in case of her death before receiving such maternity benefit an amount, or where the employer is liable for maternity benefit under the second proviso to sub-section (3) of the person 5,to the person nominated by the woman in her notice in form E and in case there is no such nominee to her legal representative.

(2) In case of doubt, the maternity benefit or other amount due to a woman employed in an establishment shall be deposited by the employer, within two months of the date of death of the woman concerned with the Competent Authority, who shall, after making necessary enquiries, pay it to the person who, in his opinion, is to receive it.

(3) Whenever the payment referred to in sub-rule (1) is made a receipt shall be obtained by the employer in form F from the person to whom the payment is made. In cases falling under sub-rule (2), a receipt entitled shall be given to the employer by the Competent Authority.

(4) The medical bonus shall be paid along with the second installment of the maternity benefit.

(5) The maternity benefit or any other amount payable under section 7 shall be paid within two months of the date of death of the woman entitle to receive such benefit or amount.

(6) The wages payable under section 9 shall be paid to the woman entitle to receive such wages within forty-eight hours of production by her of the certificate in form B or

form D.

(7) The wages payable under section 10 shall be paid to the woman entitle to receive such wages within forty-eight hours of the expiry of the period of leave referred to in that section.

6. BREAK FOR NURSING CHILD.- Each of the two breaks mentioned in section 11 shall be of fifteen minutes duration. An extra sufficient period depending upon the distance to be covered, shall be allowed for the purpose of journey to and from the crèche or the place where the children are left by women while on duty, provided that such extra period shall not be of less than five minutes and more than fifteen minutes duration. If any dispute arises regarding such extra period, the matter shall be referred to the Competent Authority for decision.

7. DUTIES AND POWERS OF THE COMPETENT AUTHORITY AND INSPECTORS.-(1) The State Government may, by notification in the Tripura Gazette, appoint such person or persons to exercise such powers and perform such functions as Competent Authority, as may be specified in the notification. The Competent Authority shall be responsible for the administration of these rules.

(2) Every Inspector shall discharge his duties within the area assigned to him by the State Government and shall act under the supervision and control of the Competent Authority.

(3) Every Inspector shall at each inspection of any establishment sec-

(a) whether due action has been taken on every notice given under section 6;

(b) whether the muster roll prescribed under rule 3 is correctly maintained;

(c) whether there have been any cases of discharge or dismissal or notice of discharges or dismissal in contravention of provisions of section 12 since the last inspection; (d) whether the provisions of sub-section (1) of section 4, sub-sections (5) and (6) of section 6, sections 8, 9, 10, 11, 13 and 19 have been paid within the prescribed time; (e) whether there have been any cases of deprival of maternity benefit or medical bonus in contravention of sub-section (2) of section 12; and

(f) how far the irregularities pointed out at previous inspections have been remedied and how far orders previously issued have been complied with.

(4) Where an Inspector observes irregularities against the Act or these rules, he shall issue orders in writing to the employer asking the latter to rectify the irregularities within a specified period and to report compliance to the Inspector.

8. ACTS WHICH CONSTITUTE GROSS MISCONDUTCT.- The following Acts shall constitute gross misconduct for the purpose of section 12, namely :-

(a)Willful destruction of employer’s goods or property;

(b)Assaulting any superior or co-employee at any place within the establishment;

(c)Criminal offence involving moral turpitude resulting in conviction in a court of law;

(d)Theft, fraud, or dishonesty in connection with the employer’s business or property; and

(e)Willful non-observance of safety measures or rules on the subject or willful interference with safety devices or with firefighting equipment.

(f) APPEAL UNDER SECTION 12- (1) An appeal under clause (b) of sub-section (2) of section 12 shall be preferred to the Competent Authority in from G.

(2) The appeal may be made in writing and either handed over personally or sent under a registered cover to the Competent Authority.

(3) When an appeal is received, the Competent Authority shall furnish a copy of the memorandum of appeal to the employer, call for his reply thereto and also ask him to produce documents connected with the issue of the appeal by a fixed date. The Competent Authority may ascertain further details if necessary, from the employer as well as from the woman. On considering the facts presented to him and ascertained by him the Competent Authority shall give his decision. In case the employer fails to submit his reply or produce the required documents within the specified period, the Competent Authority may give his decision ex-parte.

10. COMPLAINT UNDER SECTION 17. - (1) A complaint under sub-section 1 of section 17 shall be made in writing in form H or form I, as the case may be.

(2) When a complaint referred to in section 17 is received by any Inspector, he shall examine the relevant records maintained by the employer in this behalf, examine any person employed in the

establishment and take down necessary statement for the purpose of the enquiry and if he is satisfied the the maternity benefit or the amount has been improperly withheld, he shall direct the employer to make payment to woman or to the person claiming the payment under section 7, as the case may be, immediately or within a specified period.

11. APPEAL UNDER SECTION 17. - (1) An appeal against the decision of the Inspector under sub-section (2) of section 17, shall lie to the Competent Authority.

(2) The aggrieved person shall prefer an appeal in writing to the Competent Authority in form J and file other supporting documents.

(3) When an appeal is received the Competent Authority shall call from the Inspector, before a fixed date, the record of the case. The Competent Authority shall if necessary, also record the statements of the aggrieved person and of the Inspector and seek clarification if any is required.

(4) Taking into account the documents, the evidence produced before him and the facts presented to him or ascertained by him, the Competent Authority shall give his decision.

12. SUPPLY OF FORMS.- The employer shall supply to every woman employed by him at her request free of cost copies of forms B, C, D, E, F, G, H and I.

13. NON SUBMISSION OF NOTICES, APPEALS OR COMPLAINTS IN THE PRESCRIBED FORMS.-

Nothing in rules 5, 9 and 10 shall affect the right of a woman entitled to receive maternity benefit or any other amount due under the Act if she fails to submit a notice, appeal or complaint under the said rules, as the case may be, in a prescribed form:

Provided that where a notice, appeal or complaint under the said rules has been submitted by a woman entitled to receive maternity benefit or any other amount due under the Act in a form, other than the prescribed form, the authority concerned may, within fifteen days of the receipt of such notice, appeal or complaint require the woman to submit the notice, appeal or complaint, as the case may be in the prescribed form.

14. RECORDS.- Records kept under the provisions of the Act and these rules shall be preserved for a period of two years from the date of their preparation.

15. ABSTRACT.- The abstract of the Act and these rules required to be exhibited under section 19 shall be in form K and shall be exhibited in such manner as the Competent Authority may require.

16. ANNUAL RETURNS.- (1) The employer of every establishment shall on or before the twenty-first day of January in each year submit to the Competent Authority of if the latter so directs, to the Inspector within whose jurisdiction the establishment is situated, a return in each of the forms L, M, N, and O giving information as to the particulars specified in respect of the preceding year.

(2) If the employer of any establishment to which the Act app lies sells abandons or discontinues the working of the establishment, he shall, within one month of the date of sale or abandonment or four months of the date of discontinuance, as the case may be, submit to the Competent Authority or if the latter so directs, to the Inspector within whose jurisdiction the establishment is situated, a further return in each of the said forms in respect of the period between the end of the preceding year and the date of sale, abandonment or discontinuance.

FORM A

(See rule 3)

MUSTER ROLL

Name of the establishment…….

1.Serial Number.

2.Name of woman and her father's (or if married, husband's) name.

3.Date of appointment.

4.Nature of work.

5.Dates with month and year in which she is employed, laid off and not employed.

Month.	Number of days employed.	Number of days laid off.	Number of days not employed.	Remarks

6.Date of which the woman gives notice under section 6.

7.Date of discharge/dismissal, if any.

8.Date of production of proof of pregnancy under section 6.

9.Date of birth of child.

10.Date of production of proof of delivery/miscarriage/death.

11.Date of production of proof of illness referred to in section 10.

12.Date with the amount of maternity benefit paid in advance of expected delivery.

13.Date with amount of subsequent payment of maternity benefit.

14.Date with the amount of bonus, if paid under section 8.

15.Date with the amount of wages paid on account of leave under section 9.

16.Date with the amount of wages paid on account of leave under section 10 and period of leave granted.

17.Name of the person nominated by the woman under section 6.

18.If the woman dies, the date of her death, the name of the person to whom maternity benefit and/or other amount was paid, the amount thereof, and the date of payment.

19.If the woman dies and the child survives, the name of the person to whom the amount of maternity benefit was paid on behalf of the child and the period for which it was paid.

20.Signature of the employer of the establishment authenticating the entries in the muster roll.

21.Remarks column for the use of the Inspector.

FORM B

[See rule 4(1)]

This is to certify that I examined…….. wife/daughter of ……a woman employee in ……..(name of establishment) on…(date) and found/cannot discover that she is pregnant and is expected to be delivered of a child within….(month and/days from the above mentioned date/has undergone miscarriage/has been delivered of a child on …….(date) or is suffering from……(date from illness arising out of pregnancy/delivery/premature birth of a child or miscarriage.

Date……..

Signature, qualifications and designation of Medical Officer/Medical Practitioner.

Definitions of ―Child‖ and ―Miscarriage‖ as in the Maternity Benefit Act. 1961.

1.―Child‖ includes a still-born Child.

2.―Miscarriage‖ means expulsion of the contents of a pregnant uterus at any period prior to or during the twenty-sixth week of pregnancy but does not include any miscarriage the causing of which is punishable under the Indian Penal code.

FORM C

[See rule 4(4)]

This is to certify shrimati……..

Wife/daughter of…… employed in…… (name of establishment) expired on …….. before/during/after confinement.

The child died on……./survives her,

Date……

Signature, qualifications and designnation of Medical Officer/Medical Practitioner.

FORM D

[See rule 4(5)]

This is to certify that I examined…….. wife/daughter of ……a woman employed in ……..…..(name of establishment) and found that she has been delivered of a child/has undergone miscarriage on……..(date).

Date…… Signature of registered midwife.

Definitions of ―Child‖ and ―Miscarriage‖ as in the Maternity Benefit Act. 1961.

1.―Child‖ includes a still-born Child.

2.―Miscarriage‖ means expulsion of the contents of a pregnant uterus at any period prior to or during the twenty-sixth week of pregnancy but not include any miscarriage the causing of which is punishable under the Indian Penal code.

FORM E

[See rule 5(1)]

Notice under Section 6 of the Maternity Benefit Act. 1961.

(Name of the Establishment)

I,……..(name of the woman), wife/daughter of (establishment), hereby give notice that I expect to be confined within six weeks next following from the date of this notice/had given birth to a child……..(date) and shall be absent from work from ……..(date).

I shall not work in any establishment during the period for which I received maternity benefit.

2. For the purpose of Section 7, I hereby nominate …….(here enter name and address of the nominee) to receive maternity benefit and or any other amount due to me under the Act in case of my death.

Signature of an Attestor in case the
Woman is not able to sign and affixes
Thumb impression.

Date…… Signature or thumb impression of woman

FORM F

[See rule 5(3)]

Form of receipt of Maternity Benefit.

To

……..(name of establishment).

I, …….the undersigned a woman employee/the nominee of……..woman employee/legal representative of…….woman employee deceased in ……(name of establishment) at…….in ……district received maternity benefit and/or other amount due under the Maternity Benefit Act, 1961, from the employer of the establishment referred to above, as detailed below:-

Rs. , being the first installment of maternity benefit paid on……

Rs. , being the second installment of maternity benefit after delivery paid on……..

Rs. , being the medical bonus under section 8 paid on……

Rs. , being the wages for the leave period from .....
to ……mentioned under section 9 or section 10.

My/Her confinement/miscarriage took place on……or I/She fell ill because of pregnancy, delivery, premature birth of a child or miscarriage on…….. . In consequence, I…… her nominee/legal representative have received the aforesaid amounts prescribed in sections 5, 8, 9 and 10 of the Maternity benefit Act, 1961.

Signature or thumb impression of
*woman employee or her nominee or
legal representative.

Signature of an Attestor in case the woman is not able to sign and affixes thumb impression.

Date…….

*Strike out unnecessary portion,

FORM G

(See rule 9) To
The Labour Commissioner,
West Bengal.

Sir,

I, ……the undersigned woman employee of……..(name of the establishment and full address) having been wrongly deprived by the employer of maternity benefit or medical bonus or both (strike out unnecessary portion) for the reasons attached hereto, prefer this appeal under sub-section (2) of section 12 and request that the said employer be ordered to pay the above mentioned amount to me. A copy of the order of the employer in this behalf is enclosed.

Signature or thumb impression of
Woman.

Date…….

Signature of an Attestor in case the
woman is not able to sign and affixes
thumb impression.

FORM H

(See rule 10)

To

The Inspector,

(Under the maternity Benefit Act, 1961).

Sir,

I, ……(Name of woman), employed in……. (Name and full address of establishment) having fulfilled the conditions laid down in the Maternity Benefit Act, 1961 and the Rules there-under and entitled to Rs. ……..being maternity benefit and/or Rs……..being wages for leave due under section 9 or section 10 but the same has been improperly withheld by the employer. He may, therefore be directed to pay the amount to me.

*Signature or thumb impression of Woman.

Date…….

Signature of an Attestor in case the woman is not able to sign and affixes thumb impression.

*Strike out unnecessary portion.

FORM I

(See rule 10)

To

The Inspector,

(Under the maternity Benefit Act, 1961).

Sir,

I, ……(name), a person nominated under section 6 by or a legal representative of ….(name of woman) employed in…..(name and full address of establishment) have to complain that the said woman having fulfilled the conditions laid down in the Maternity Benefit Act, 1961 and the Rule thereunder if entitled to Rs…….being maternity benefit and/or Rs…..being the medical bonus and/or Rs…….. bening wages for leave due under section 9, section 10 but the same has been improperly withheld by the employer. He may, therefore, be directed to pay the amount to me.

Signature or thumb impression of
the nominee/legal representative.

Date…….

Signature of an Attestor in case the
Nominee/legal representative is unable to sign
and affixes thumb impression.

Full address of the nominee/legal representative.

FORM J

(See rule 11)

To

Sir,

Shri……Inspector, having directed under sub-section (2) of section 17 to pay the maternity benefit or other amount being…….(nature of amount) to which…….(name of woman) is said to be entitled. I prefer this appeal under sub-section (3) of section 17. In view of the facts mentioned in the memorandum attached hereto and other documents filed herewith it is submitted that the woman is not entitled to the maternity benefit of the said amount hence the decision of the Inspector in this behalf copy of which is enclosed, may be set aside.

Signature of aggrieved person.

Full address:

Date……

FORM K

(See rule 15)

(Abstract of the Maternity Benefit Act, 1961 and the rules made there-under)

1.No employer shall knowingly employ a woman during the six weeks immediately following the day of her delivery or miscarriage and no woman shall work in any establishment during the said period.

2.No Pregnant woman shall, on a request being made by her in this behalf, be required by her employer to do during the period of one month immediately preceding the period of six weeks before the date of her expected delivery and also for any period during this period for six weeks for which she does not avail of leave of absence any work which is of an arduous nature or which involves long hours of standing or which in any way is likely to interfere with her pregnancy or the normal development of the foetus, or is likely to cause her miscarriage or otherwise to adversely affect her health.

3.(1) Subject to the provisions of the Act, every woman who has actually worked in an establishment of the employer from whom she claims maternity benefit for a period of not less than one hundred and sixty days, including the days during which she was laid off, shall be entitled to, and her employer shall be liable for, the payment of maternity benefit at the rate of her average daily wages absence not exceeding six weeks immediately preceding and including the day of her delivery and for the six weeks immediately following that day:

Provided that where a woman dies during the period for which maternity benefit is payable to her, the benefit shall be payable only for the days upto and including the day of her death. However, where the woman having been delivered of a child, dies during her delivery or during the period of six weeks immediately following the date of her delivery, leaving behind in case the child, the employer shall be liable for the payment of maternity benefit for the entire period of six weeks immediately following the day of her delivery but if the child also dies during the said period, than, for days upto and including the day of the death of the child.

(2) The amount of maternity benefit for the period preceding the date of her expected delivery shall be paid in advance by the employer to the woman on production of a certificate in form B stating that she is pregnant and is expected to be delivery of a child within six weeks of the date of production of the certificate, and the amount due for the subsequent period shall be paid by the employer to the woman within forty eight hours of production of the certificate in form B or

form D stating that she has been delivered of a child or production of a certified extract from a Birth Register maintained under the provisions off any law for the time being in force.

4.(1) Any woman employed in an establishment and entitled to maternity benefit under the provisions of this Act may give notice in writing in form E, to her employer, stating that her maternity benefit and any other amount to which she may be entitled under this Act may be paid to her or to such person as she may nominate in the notice and that she will not work in any establishment during the period for which she receives maternity benefit.

(2) In the case of woman who is pregnant, such notice shall state the date from which she will be absent from work, not being a date earlier than six weeks from the date of her expected delivery.

(3)Any woman who has not given the notice when she was pregnant may give notice as soon as possible after delivery.

(4)On receipt of the notice, the employer shall permit such woman to absent herself from the establishment until the expiry of six weeks after the day of her delivery.

5.(1) Every woman entitled to maternity benefit under the Act shall also be entitled to receive from her employer a medical bonus of twenty five rupees, if no parental, confinement and postnatal care is provided for by the employer free of charge. The medical bonus shall be paid along with the second installment of the maternity benefit.

(2) In case of miscarriage, a woman shall, on production of a certificate in Form B or Form D be entitled to leave with wages at the rate of maternity benefit for a period of six weeks immediately following the day of her miscarriage. The wages shall be paid within forty-eight hours of production of the certificate in Form B or Form D.

(3) A woman suffering from illness arising out of pregnancy, delivery, premature birth of child or miscarriage shall on production of a certificate in Form 2 be entitled, in addition to the period of absence allowed to her on account of maternity or miscarriage, as the case may be to leave with wages at the rate of maternity benefit for a maximum period of one month. The wages for the leave period shall be paid within forty-eight hours of the expiry of that period.

6.Every woman delivered of a child who returns to duty after such delivery shall, in addition to the interval for rest allowed to her, be allowed in the courts of her daily work to breaks of fifteen minutes' duration for nursing the child until the child attains the age of fifteen months. An extra sufficient period the pending upon the distance to be covered, shall be allowed for the purpose of the journey to and from the crèche or the place where the children are left by woman while on duty, provided that such extra period shall not be less than five minutes' and more than fifteen minutes' duration.

7.(1) When a woman absence herself from work in accordance with the provision of act, it shall be unlawful for her employer to discharge or dismiss her during or on account of such absence or to give notice of discharge or dismissal on such a day that the notice we expire during such absence, or to vary to her disadvantage any of the condition of her service.

(2) (a) The discharge or dismissal of a woman to any time during her pregnancy, if the woman but for such discharge or dismissal would have been entitled to maternity benefit or medical bonus, shall not have the effect of depriving her of the maternity benefit or medical bonus.

Provided that where the dismissal is for one or more of the following Acts, the employer may, by order in writing communicated to the woman, deprive her of the maternity or medical bonus or both;

(i) Willful destruction or employers goods or property;

(ii) Assaulting any superior of co-employee at any place within the establishment;

(iii) Criminal offence involving moral turpitude resulting in conviction in a court of law;

(iv) Theft, fraud or dishonesty in connection with the employers business or property; and

(v) Willful non-observance of safety measures or rules on the subject or willful interference with safety devices or with fire-fighting equipment.

(b)Any woman deprived of maternity benefit or medical bonus or both, may within sixty days from the date of which the order of such deprivation is communicated to her, appeal in From G to the Competent Authority and his decision on such appeal whether the woman should or should not be deprived of maternity benefit or medical benefit for such period.

8.If an woman work in any establishment after she has been permitted by her employer to abscent herself under the provisions of the Act, she shall forfeit her claim to the maternity benefit for such period.

9.(1) Any woman calming that maternity benefit or any other amount to which she is entitled under the act and any person claiming that payment due has been improperly withheld may make a complaint to the Inspector in writing in form H or I, as the case may be.

(2) The Inspector may, of his own motion or on receipt of a complaint in form H or I make a enquiry or cause an enquiry to be made and if satisfied that payment has been wrongfully withheld, may direct the payment to be made in accordance with his orders.

(3) Any person aggrieved by the decision of the Inspector may, within thirty days from the date on which such decision is communicated to such person, appeal to the Competent Authority. (4) The decision of the Competent Authority, where an appeal has been preferred him or of the Inspector where no such appeal has been preferred, shall be final.

10. (a) The employer shall supply to every woman employed by him at her request free of cost copies of forms B, C, D, E, F, G, H and I.

(b) The failure to submit a notice, appeal or complaint in the prescribed form will not affect the right of a woman entitled to receive maternity benefit or any other amount due to under the Act. Where a notice, appeal or complaint has been received in a form other than the prescribed form, the authority concerned shall within fifteen days of the receipt of such notice, appeal or complaint, require the woman to submit the notice, appeal or complaint, as the case may be in the prescribed form.

11.a) 1) The employer of every establishment in which woman are employed shall prepare and maintain a muster roll in form A and shall enter therein particulars of all woman workers in the establishment.

2) All entries in the muster roll shall be made in ink and maintained up-to-date and it shall always be available for inspection by the Inspector during working hours.

b) The employer of every establishment shall on or before the twenty-first day of January in each year submit to the Chief Inspector of Factories, or if the latter so directs, to the Inspector within whose jurisdiction the establishment is situated a return in each of the forms L, M and N giving information as to the particulars specified in respect of the preceding year.

FORM- L
(See rule 16)

Annual return for the year ending on the 31st December, 19……

1.Name of the establishment.

2.Address of the establishment, P.O. District.

3.Date of opening of the establishment.

4.Date of closing, if closed.

5.Postal address of the establishment.

6.Name of employers, postal address of employers.

7.Name of managing agent, if any, postal address of managing agent.

8.Name of Agent or representative of employer, postal address of representative of employer.

9.Name of Manager, postal address of Manager.

10. a) Name of the medical officer, if any, attached to the establishment.
b) Qualification of medical officer attached to the establishment.
c) Is he resident at the establishment?
d) If a part-time employer, how often does he pay visit to the establishment.

11.a) Is there any hospital attached to the establishment?
b) If so, how many beds are provided for woman employees?
c) Is there a lady doctor?
d) If so, what are her qualifications?
e) Is there a qualified midwife?
f) Has any crèche been provided?

Signature of employer,
date.

FORM M

(See rule 16)

Employment, dismissal, payment of bonus, etc., of woman for the year ending on 31st December, 19

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 and sixty days in the twelve months immediately preceding the date of delivery.

4.Number of women who gave notice under section 6.

5.Number of women who were granted permission to absent on receipt of notice of confinement.

6.Number of claims for maternity benefit paid.

7.Number of claims for maternity benefit rejected.

8.Number of cases where pre-natal, confinement and postnatal care was provided by the management free of change (Section 8).

9.Number of claims for medical bonus paid (Section 8).

10.Number of claims 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 person 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 provision to sub-section (2) of section 12.

19.Number of cases in which payment was made on the before of the Competent Authority or Inspector.

20.Remarks.

N.B—Full particulars of each case and reasons for the action taken under Serials 7, 10, 12, 14, 17 and 18 should be given in the Appendix below.

Signature of employer,
date.

FORM N

(See rule 16)

Details of payment made during the year ending 31st December, 19.

Name of person to whom paid Amount paid.

1.Date of payment.

2.Woman employee.

3.Nominee of the woman.

4.Legal representative of the woman.

5.Amount for the period preceding date of expected delivery.

6.Amount for the subsequent period.

7.Under Section 8.

8.Under Section 9.

9.Under Section 10.

10.Number of women workers who absconded after receiving the first installment of maternity benefit.

11.Cases where claims were contested in a court of law.

12.Results of such cases.

13.Remarks.

Signature of employer,

Date.