Govt. of Andhra Pradesh LABOUR DEPARTMENT

FORM - I

Application for Registration of Establishment under Section (1) & Rule (3)

Vide Rule 3 A. P. Shops & Establishment Rule 1990 STATEMENT

1.	Classification of Establishment:	1. Proprietory Firm
		2. Partnership Firm
		3 Private Limited Company
		4. Public Ltd. Company
2.	Category of Establishment:	1. Shop
		2. Commercial Establishment
	•	3. Hotel, Restaurants Catering House Lodging and Cafe
		4. Theatres Cinema and other places of Public amusements
3.	Name of Establishment:	MODI PROPERTIES AND INVESTMENTS PUT LTD.
4.	Address:	Door No. 5-4-18-7 3 2 4,
		Locality Ranigumi, M.G. Road
		Village / Town Hydrodood (Sce'bad)
		District
		Pin Code Socoos
5.	Location of Office, Godown, Ware- house or work place attached to the	Door No. Locality
	Shop/Establishment but situated outside the premises of it	1
		2
		3.
6.	Employer Managing Partner or Managing Director as the case may be	Name Mr. Soham Modi
	1	Father's Name SHELL SATISH MODI
-		Designation Managing Wileday
7.	Residential address of the Employer	Door No Plot no. 280, Read no. 25
	•	Locality _ Jubilee Hills,
		Village / Town Hydinahad.
8.	Manager/Agent if any with residential address)	Name
	With rooms and a servery	Father's Name
		Designation N.A
		Door No.
		Locality
		Village / Town

t of business &	gm Date	0 Jun	Mont ع	h 1994	Year
er of employees family	engaged in	Shop / E	stablishmer	ıt.	
Adults		Youn	g persons		
		•			
, .	· · · · · · · · · · · · · · · · · · ·			· ,	
:	Adul	ls		Young	Person
Male Female Total	As per	Annesour			
				<u></u>	
		loading	and unload	ding (Others
2			3		4
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As per Annexi	m - 11				
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the fees :					
Challan No		te	Amoun		aid
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	1 1				
above information is t	rue to the b	est of m	y knowled	ige and	belief
	and the second s				*.
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garan da karangan kalangan karangan karangan karangan karangan karangan karangan karangan karangan karangan ka Karangan karangan ka			Signature of	of the Emp	lover
	Male Female Total As sweeper careta travelling state 2 As per Annexed the fees: Challan No. 2	Adults Adults Adults Adults As sweeper caretaker and travelling staff 2 As per Annexum - 11 the fees: Challan No Dan 2 3	Adults Adults Adults Young Adults Male Female Total As prev Amexica loading of goo 2 As prev Amexica Challan No Date Challan No Date 2 3	Adults Adults Young persons Adults Male Female Total As sweeper caretaker and travelling staff 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 2 As persons employed loading and unload of goods at godon 3 As persons employed lo	Adults Young persons Adults Young persons Adults Young persons Male Female Total As persons employed for loading and unloading of goods at godowns 2 3 As per Amexica 3

Note: This statement shall be submitted to the Inspector of the concerned area accomplained by challan in support of payment of fees as Prescribed in Schedule.

Managing Director

Govt. of Andhra Pradesh LABOUR DEPARTMENT

Application for Registration of Establishment under Section (1) & Rule (3)

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Vide Rule 3 A. P. Shops & Establishment Rule 1990 STATEMENT

1.	Classification of Establishment:	1. Proprietory Firm
		2. Partnership Firm
		3 Private Limited Company
		4. Public Ltd. Company
2.	Category of Establishment:	1. Shop
		2 Commercial Establishment
	•	3. Hotel, Restaurants Catering House Lodging and Cafe
		4. Theatres Cinema and other places of Public amusements
3.	Name of Establishment:	MODI PROPERTIES AND INVESTMENTS PUTLIN
4.	Address: .	Door No. 5-4-187/324,
		Locality Ranigunj, M.C. Road
		Village / Town Hydrahad (Scc' bad)
	•	District
		Pin Code 500,003.
5.	Location of Office, Godown, Ware- house or work place attached to the	Door No. Locality
	Shop/Establishment but situated outside the premises of it	1
	Outing the production	2.
		3.
6.	Employer Managing Partner or Managing Director as the case	Name Mr. SOHAM MODI
	may be	Father's Name CHRI SATISH MOOI
		Designation Managing Director
7.	Residential address of the Employer	Door No Plat no 280, load no -25
	•	Locality Julie Hills
		Village / Town Hydrahad.
8.	Manager/Agent if any	J
o.	with residential address)	Name
		Father's Name
		Designation 17th
		Door No.
		Locality
		Village / Town

9. Nature of Business	REAL ES	TATE					
10. Date of Commencement	of business	284	Date	June	Month	1994	Year
11. Name and family member	r of employees fa	imily enga	ged in	Shop / Esta	blishment.		
Relationship	Adı	ılts		Young p	ersons		
Male	·						
Female						•	
Total							
2. Total No. of Employees :	Male Female Total	As	Adults	Annexue -	Î.	Young (Person
3 Name of Employees							
In a Managerial capacity	As sweeper ca travellin		nd	As persons loading an		ng (Others
1	2			3			4
		•					
	As per An	nexus - j	2				
4. Details of remittances of t	he fees :				•		
Name of the Treasury	Challan No.		Date 3		Amount	of Fee pa	id
<u> </u>		,		1		+	
I have declare that the a	bove information	is true to	the be	st of my	knowledge	e and l	bolief
			•				
		. • .	:	Sig	nature of	the Emp	loyer
lote: This statement shall be by challan in support o	submitted to the fayment of fee	e Inspecto s as Presc	r of th	o r Modi Pro e concerne Schedule 1	ed area A	investme sccompla Menag	ined)

Govt. of Andhra Pradesh LABOUR DEPARTMENT

Application for Registration of Establishment under Section (1) & Rule (3)

FORM - I

Vide Rule 3 A. P. Shops & Establishment Rule 1990 STATEMENT

1.	Classification of Establishment:	1. Proprietory Firm
	•	2. Partnership Firm
		3. Private Limited Company
		4. Public Ltd. Company
2.	Category of Establishment:	1. Shop
		2. Commercial Establishment
	•	3. Hotel, Restaurants Catering House Lodging and Cafe
		4. Theatres Cinema and other places of Public amusements
3.	Name of Establishment:	MOOI PROPERTIES AND INVESTMENTS PUT LTD.
4.	Address:	Door No. 5-4-187/3 24.
		Locality Romigung, M.G. Road,
		Village / Town Hydrobad. (Sec'bad)
		District
		Pin Code Sooos.
5.	Location of Office, Godown, Ware- house or work place attached to the	Door No. Locality
	Shop/Establishment but situated outside the premises of it	1.
		2
		3.
6.	Employer Managing Partner or Managing Director as the case may be	Name Mr. Soham Modi
	may bo	Father's Name Shell SATISH MODI
		Designation Managing Director
7.	Residential address of the Employer	Door No Plat no-280, Road no-25
	•	Locality Jubiles Lills.
		Village / Town Hydrobad.
8.	Manager/Agent if any	
	with residential address)	Name
		Father's Name
		Designation
		Door No
		Village / Town

10. Date of Commencement 11. Name and family member Relationship Male		२८		Month 194	14 Yea
Relationship		engaged in	Shop / Estal	- liabon a - 4	
	Adults			onsninent.	
Male			Young p	ersons	
Walo			فالقيوان والمقرف بيسي ويواري مغيور فالميسيديون والمتحد		
Female					
Total					
12. Total No. of Employees :	Male Female Total	Aduli As per	S Annexure		ng Person
3 Name of Employees		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
In a Managerial capacity	As sweeper caretal travelling sta		loading an	employed for d unloading at godowns	Others
1	2	·	3		4
	As for Amnerou				
•	·	.		· ·	
4. Details of remittances of					
Name of the Treasury	Challan No.	Dat	e	Amount of Fe	e paid
I have declare that the	above information is tr	rue to the b	est of my	knowledge ar	d belief
Note: This statement shall be	e submitted to the Inst	pector of	er Modi Pro	nature of the E	unente Pa

F O R M - F

(See Rule 6) STATEMENT REGARDING CONTRIBUTION

From:

	· •	
То		
The	Welfare Commissioner,	
And	lhra Pradesh Labour Welfare Board,	, Hyderabad.
here	iculars relation to the amount of Rs.	payble by my establishment both a employees
A s drav	eperate list containing the names of vn by each of them as also design	f employees engaged for the period amount of monthly wages nation of each of them is attached herewith.
	P A	RTICULARS
1.	Name of the establishment with full address:	5-4-187/384, Soham travsion, M. G. Road, See bad
2.	Whether a factory or motor transport undertaking commercial esst/ or any other class of esst. specified by a Govt. Notification:	-N.A-
3.	Total No. of employees employed on preceeding 31 December	
4.	Total No. of employees from whom contribution has been deducted for the period.	
5.	Total amount of employees' contribution tendered for the period.	
6.	Total amount employer's contribu- tion tendered for the period.	
7.	Grand Total of both the employees, as well as the employer's contribution deducted and tendered respectively for the period.	
8.	Whether fullpayment of the amount due to the period has been tendered.	
9.	Amount of unpaid balance if any and the reasons there for.	
10.	Mode of payment whether in cash or by Bank D.D. or M.O. if by money order mention postal receipt No. and date there of/ifby D.D. mention name branch and address of bank on which drawn D.D. No. & Date.	
11.	Remarks if any	
& be		entioned particulars are true and correct to best of my knowledge
Place	e :	
Date	•	SIGNATURE & DESIGNATION
		Man Wast Drangeries & Investments Put. L

Managing Director

$F \ O \ R \ M \ - \ F$ STATEMENT REGARDING CONTRIBUTION

From:

		Carlos Ca		
То				
Andh	Welfare Commissioner, are Pradesh Labour Welfare Board, he will as the total amount of Rs	navnie Dv	IIIA Corasioini	w the necessary INTERIOR Oth a employees
as v	well as employer's contribution for the			n monthly wages
drav	wh hy each of filetti as also dollars		•	and the second of the second o
	P A F	T I C U L A	ח ט	75 PYT LTD.
1.	P A F Name of the establishment with full address:	5-4-184/3 24, 3 oho	im maner on, M. a	lood, Section
2.	Whether a factory or motor transport undertaking commercial esst/ or any other class of esst. specified by a Govt. Notification:	- N.A		
3.	Total No. of employees employed on preceeding 31 December			
4.	Total No. of employees from whom contribution has been deducted for the period.			
5.	Total amount of employees' contribution tendered for the period.			
6.	Total amount employer's contribution tendered for the period.			
7.	Grand Total of both the employees, as well as the employer's contribu-	•		

due to the period has been tendered.

8. Whether fullpayment of the amount

tively for the period.

tion deducted and tendered respec-

- 9. Amount of unpaid balance if any and the reasons there for.
- 10. Mode of payment whether in cash or by Bank D.D. or M.O. if by money order mention postal receipt No. and date there of/ifby D.D. mention name branch and address of bank on which drawn D.D. No. & Date.
- 11. Remarks if any

I here by declare that the above mentioned particulars are true and correct to best of my knowledge & belief.

Place :

Date:

Per Modi Properties & Investments Pvt. Ltd. SIGNATURE & DESIGNATION

Managing Directer

F O R M - F

(See Rule 6) STATEMENT REGARDING CONTRIBUTION

From:

То						
	Welfare Commissioner, Ihra Pradesh Labour Welfare Board	, Hyderabad.				
part here	As required under rule 5 of A.P. Welfare Fund Rules ,1988, I am furnishing below the necessary particulars relation to the amount of Rs (Rupees) tendered here with as the total amount payble by my establishment both a employees as well as employer's contribution for the year ending 31st December					
		f employees engaged for the period amount of monthly wages nation of each of them is attached herewith.				
	PA	RTICULARS				
1.	Name of the establishment with full address:	MODI PROPERTIES AND INVESTMENTS PYT LTD. 5-4-187/324, Boham Maurian, M.G. Road, Secily				
2.	Whether a factory or motor transport undertaking commercial esst/ or any other class of esst. specified by a Govt. Notification:	- N. A-				
3.	Total No. of employees employed on preceeding 31 December					
4.	Total No. of employees from whom contribution has been deducted for the period.					
5.	Total amount of employees' contribution tendered for the period.					
6.	Total amount employer's contribution tendered for the period.					
7.	Grand Total of both the employees, as well as the employer's contribution deducted and tendered respectively for the period.					
8.	Whether fullpayment of the amount due to the period has been tendered.					
9.	Amount of unpaid balance if any and the reasons there for.					
	Mode of payment whether in cash or by Bank D.D. or M.O. if by money order mention postal receipt No. and date there of/ifby D.D. mention name branch and address of bank on which drawn D.D. No. & Date.					
11.	Remarks if any					
& be		entioned particulars are true and correct to best of my knowledge				
Place) :					
Date	:	SIGNATURE & DESIGNATION				
		For Modi Properties & Investments Pvt. Li				

Managing Director