



# SANT PARMANAND HOSPITAL

A Unit of Sant Parmanand Blind Relief Mission

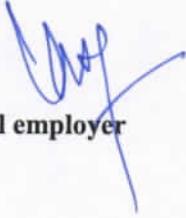
## FORM I

[See rule 17 (1)]

1. Name and Location of the Establishment : Sant Parmanand Hospital  
(A unit of Sant Parmanand Blind Relief Mission) (Opp.) Hanuman Mandir,
2. Postal address of the establishment : Plot No. 1, 2 & 3 Park Area, Yamuna Bazar,  
Delhi-110006.
3. Full Name and address of the Principal Employer (furnish father's name in case of individuals) : SOCIETY
4. Full Name and address of the Manager or person responsible for the supervision and control of the establishment : Mr. Yatendra Chaudhary  
Director -HR
5. Nature of work carried on in the establishment. : Hospital
6. Particulars of Contractor and contract labour :
  - a) Name and Addresses of contractors :
    1. Bawa Detective,  
Flat No. 164, Sector-2,  
Pocket-3, Ground floor,  
Rohini, Delhi.
    2. Ujjwal Enterprises,  
611, Joshi Road, Karol Bagh,  
New Delhi.
    3. Shardha Saburi,  
CB-190, First Floor, Ring Road,  
Nariana, Delhi-110028.
  - b) Nature of work in which contract labour is employed or is to be employed. :
    1. Security
    2. House keeping
    3. Kitchen
  - c) Maximum number of contract Labour to be employed on any day through each contractor. :
    1. Security 50
    2. Housekeeping 150
    3. Kitchen 10
  - cc) Estimated date of commencement of each contract work under each contractor : 1<sup>st</sup> April of each year

- d) Estimated date of termination of employment of contract labour under each contract : 31<sup>st</sup> March of each year
7. Particular of demand draft enclosed (Name of the Bank, amount, demand draft No. And date).

I hereby declare that the particular given above are true to the best of my knowledge and belief.

  
**Principal employer**