The Inter-State Migrant Workmen (MAH) Rule, 1985 FORM "I" [See Rule 3 (1)] Application for Registration of Establishment employing Migrant Workmen

	J.T.N / यु.टी.एन				
	Status / स्थिति				
Registration No / नोंदणी क्रमा□ :					
	Date / दिना🏻				
1	¹ Name of the Establishment / आस्थापनेचे नाष्ठ				
Location of the Establishment / आस्थापनेचे ठि□ ाण					
	State / राज्य				
	District / जिल्हा				
	City / Village / शहर / गा ग्र				
	Pincode / पिन⊔ ष्ड				
	Postal address of the Establishment / आस्थापनेचा डा⊔े चा पत्ता				
	Full name of the Principal Employer (furnish father's / husband's name in the case of individuals) / मुख्य माल□ ाचे पूर्ण ना 				
	Address of the Principal Employer / मुख्य माल⊔ ाचा पत्ता				
⁴ Directors / Partners (in case of companies and firms) / सम्राल□ / भागीदार ———————————————————————————————————				Address	
		Director Name		-uui ess	
5		anagers / Supervisors / व्यवस्थापः / पर्यवेक्षः			
	Name Address				
6	⁶ Nature of work carried on in the establishment / आस्थापनेत				
चालू असलेल्या 🛘 ामाचे स्वरूप					
7	⁷ Contractor Details / □ाम्राटदाराची माहिती				
	ContractorName	Maximum Workmen Employed	Contract Start Date	Contract End Date	