FORM 'A - 1'

SECURITY GUARDS BOARD FOR BRIHAN MUMBAI & THANE DISTRICT.

Copper Rollers Pvt. Ltd. Compound, 2nd floor, L.B.S. Marg, Bhandup (W), Mumbai-400 078.

APPLICATION FOR REGISTRATION OF EMPLOYER AGENCY OF EXEMPTED SECURITY GUARD. [See Clause 13(1)(a)]

	Registration No (to be filled in by Board Office)	
1.	Name and address of the Agency and Tel. No.	
	Address & Tel. No. of the Head Office/ Reg. Office, if any.	-
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	E #	
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2.	*(a) Whether the Employer Agency is Private Firm/Partnership Firm/ Pvt. Ltd. Co./Co-op. Society?	· · · · · ·
	*(b) Licence No. under Contract Labour (Regulation & Abolition) Act, 1970.	
	Registration under any other statute	
	(c) Give the name and addresses of the person in charge of Employer Agency and also give the name of the Proprietor/Partners/Directors/Chief Executives/Managers alongwith their	
	residential addresses and Phone Nos.	
	(Please attach annexure for the above details, if necessary)	
3.	Give the name & Residential Address of the Incharge of the Employer Agency.	
	(in case of any change, please inform immediately)	

(*Strike out which is not applicable) --2

	in respect Directors	of the Emplo						.,	
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	If yes, giv	ve details;		\$33	*********		***********		
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5.	Are you member of any Association? If yes, state the name & address of the Respective Association and its regist-								
			n and its r	egist-	* *******	•••••	*************	••••••	
	ration No) .							

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6.	Total num	nber of Princ	nol Empl	OVOTO			888		
0.		rvices through	*******						
		Please attach							
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7.	Total Nu	mber of Exen	noted Priv	rate	17				
		Guards deplo			********				
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8.	Furnish th	he details of t	he Exemp	nted Sec	curity			·	
		rovided by th				477			
	to the respective registered Principal								
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		rs. (Category			1000000000				
	Employe	rs. (Category	wise)	•				12	
	Employe		wise)	•	ing format			y a	
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	(Please for Name of the Principal	rs. (Category urnish the det Name of the Exempted	wise) ails as per	follow Date of	Permanent Address)	Place of	Adquate Training	Veri-
	(Please fi	Name of the Exempted Security	wise) ails as per Designa-	follow	Permanent Address (Native) Postal	Place	Adquate Training given	Veri- fica
	(Please for Name of the Principal	rs. (Category urnish the det Name of the Exempted	wise) ails as per Designa-	follow Date of	Permanent Address) Postal	Place of	Adquate Training given (Yes/	Veri-
	(Please for Name of the Principal	Name of the Exempted Security	wise) ails as per Designa-	follow Date of	Permanent Address (Native) Postal	Place of	Adquate Training given	Veri- fica tion done
	(Please for Name of the Principal	Name of the Exempted Security	wise) ails as per Designa-	follow Date of	Permanent Address (Native) Postal	Place of	Adquate Training given (Yes/	Veri- fica tion done
No.	Please for Name of the Principal Employer	Name of the Exempted Security Guard	wise) ails as per Designation	Date of Birth	Permanent Address (Native Place)	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
No.	Employer (Please for Name of the Principal Employer (2)	Name of the Exempted Security Guard	Designation (4)	Date of Birth	Permanent Address (Native Place)	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
No.	Employer (Please for the Principal Employer (2)	Name of the Exempted Security Guard (3)	Designation (4)	Date of Birth (5)	Permanent Address (Native Place)	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
No.	Please for Name of the Principal Employer (2) Whether the require	Name of the Exempted Security Guard (3)	Designation (4) (Agency on fee and	Date of Birth (5)	Permanent Address (Native Place)	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
No.	(Please for Name of the Principal Employer (2) Whether the requise process for the process f	Name of the Exempted Security Guard (3) the Employer site registration as per Clause	Designation (4) Agency on fee and use 17(2),	Date of Birth (5)	Permanent Address (Native Place)	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
No.	(Please for Name of the Principal Employer (2) Whether the requise process for the process f	Name of the Exempted Security Guard (3)	Designation (4) Agency on fee and use 17(2),	Date of Birth (5)	Permanent Address (Native Place)	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
(1) 9.	(Please for Name of the Principal Employer (2) Whether the requise process for the Schere	Name of the Exempted Security Guard (3) the Employer site registration erespective	Designation (4) Agency on fee and use 17(2), ly?	Date of Birth (5)	Permanent Address (Native Place)	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
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(1) 9.	(Please for Name of the Principal Employer (2) Whether the requise process for the Schere If yes, where the Schere Submit the Subm	Name of the Exempted Security Guard (3) the Employer site registration ee as per Claume respective that is the total ee?	Designation Designation (4) Agency on fee and use 17(2), ly? I amount ones of receives the control of the co	Date of Birth (5) has depl the 26(3) of the	Permanent Address (Native Place) (6) osited	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
(1) 9.	(Please for Name of the Principal Employer (2) Whether the requise process for the Schere If yes, where the Schere Submit the Subm	Name of the Exempted Security Guard (3) the Employersite registration as per Claume respective that is the total see?	Designation Designation (4) Agency on fee and use 17(2), ly? I amount ones of receives the control of the co	Date of Birth (5) has depl the 26(3) of the	Permanent Address (Native Place) (6) osited	Postal Address	Place of work	Adquate Training given (Yes/ No)	Veri- fica tion done (Yes/N
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11.	Please furnish the details of the Wages,			
	Allowances and other service condition	S		
	of services of the Exempted Security	***************************************		•••••
	Guards provided to the respective	#15 ME		
	Registered Principal Employers. (As pe Exemption list)			
	Exemption tist)			
	(Please attach annexure, if necessary)			2.
	(1 loade attach attach at	**		
12.	Whether, wages and allowances and other	ner		
	service conditions of the Exempted			2.0
	Security Guards of the Employer Agend	cy		
2	are more beneficial than the wages and	12 A		+
- F	allowances and other service conditions		***************************************	
1906	which are provided by Security Guards			
	Board to its registered Guards? If so,			
	in what respect.	9		
13.	Please furnish the details of terms of			
1500	Contract/Agreement between			
	Employer Agency and the Principal			•••••
	Employer.			
	9 1			*
	DECLARATION: I/We hereby de	clare that the details	given above are t	ue
	and correct to t	he best of my/our kn	owledge and belie	f.
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	ACE :	Signature of Proprieto	r/Director/Partner	
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(FOR OFFICE USE ONLY)

Certified that above information is checked and found correct/not correct and therefore the application is recommended/not recommended for registration.

AREA INSPECTOR

REMARKS OF THE ASSISTANT SECRETARY

SECRETARY

CHAIRMAN SECURITY GUARDS BOARD FOR BRIHAN MUMBAI & THANE DISTRICT.