

Form XVI**Register of Deduction for Damages or Loss**

Name and Address of Contractor

INNOVISION LIMITED.1/209, FIRST FLOOR, SADAR BAZAR, DELHI CANTT
Delhi

Name and Address of Principal Employer

M/s Escorts Health Institute and Reserch Centre LTD
Okhla Road, New Delhi-110025

Name and Address of Establishment in/under which contract is carried on

TATA PLAY LIMITED

Serial No	Name of Workman	Father's Husband's Name	Designation and Department	Particulars of Damage or Loss	Date of Damage	Whether worker showed cause	Name of person in whose persence	Amount of deduction imposed	No. of instalment s	Date of Recovery		Remarks
										First Installmen t	Last installement	
1	2	3	4	5	6	7	8	9	10	11	12	13
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Jan-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Feb-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Mar-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Apr-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										May-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Jun-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Jul-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Aug-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Sep-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Oct-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Nov-23		
NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF										Dec-23		

