



ESIC
Employees' State Insurance Corporation

Insurance

Sat 1 Oct 2022, 11:54:08 AM



EMPLOYEES' STATE INSURANCE CORPORATION

Return of Declaration Form Regulation 14

Name & Address of Factory or Establishment

SUNRISE AUTOMATION
PLOT NO. P-39, BAJAJ NAGAR,
WALUJ MIDC, AURANGABAD

Employer's Code No.

25000079280000602

I send herewith Declaration Forms in respect of the employees mentioned below. I hereby declare that every person employed as an employee within the meaning of Section 2(9) of the Employees' State Insurance Act, 1948 on in this factory or establishment and is respect of a remuneration not exceeding Rs. 15,000/- (excluding remuneration for overtime work) per month has been included in this list (excepting only those in respect of whom declaration forms have been sent to the Corporation in the past).

Place **Local Office**
Date 1/10/2022 **Designation**

SI No	Employee Name	Insurance No.	From Date.	To Date.	Exemption Status.	Registration Date
1	AJAY ASHOK GADADE	2504440408	--	--	NO	30-09-2022
2	BHIL YATIN EKANATH	2504440393	--	--	NO	30-09-2022
3	GANESH SARJERAO JANJAL	2504440440	--	--	NO	30-09-2022
4	JANKIRAM NANDKUMAR KULKARNI	2504440454	--	--	NO	30-09-2022
5	KAKASAHEB SHANKAR LANDGE	2504440468	--	--	NO	30-09-2022
6	KRUSHNA MOTIRAM PAWAR	2504440397	--	--	NO	30-09-2022
7	MANOJ BHAULAL PAWAR	2504440422	--	--	NO	30-09-2022

