

**FORM 7**  
(Prescribed under) Rule 18 (7)

(In respect of persons employed in occupations declared to be dangerous operations under sec. 87)

Name mention in form7 list

Name not mention in form7 list

Fiat India Automobiles Limited  
 Pot No. G.13. Ranjanagan MIDC, Industrial Area G12220.

NAME OF CERTIFYING SURGEON: DR. VIKAS R SABLE

Sr.N	Works No.	Name of Employee	Age	Sex	Date of Employment of Present Work	Date of Leaving or Transfer to Other Work	Reason for Leaving or Transfer or Discharge	Nature of Job or Occupation	Raw Material by product handled	Date of Medical Examination by Certifying Surgeon.	Results of Medical Examination	If Suspended from work, state period of suspension with detailed reasons	Certified fit to resume duty on with signature of Certifying Surgeon	If certificate of unfitness or suspension issued to worker	Signature of Certifying Surgeon
1		Venkatesh Gudebor	51	M	N/A	N/A	N/A		N/A	12-4-23	Fit	N/A	N/A	N/A	[Signature]

डॉ. विकास साबळे MBBS, MS, FFIA  
 कार्यालये अधिसूचना १९४६, आ.क.स. १०(३) प्रमाण  
 ०१/०१/२०२३ पासून ०१/०१/२०२४  
 पो. निवडकारीता ०१/०१/२०२३ पासून ०१/०१/२०२४  
 एसेस प्रसिद्ध प्रमाणक शल्य चिकित्सक के. ACSEI-MS/2023