A CONTRACTOR	Employees' State	Insurance Corporation		Insurance				
User Login: 33000547110000699				Thursc	Thursday, December 21, 2023 3:53:41 PM			
Employer >	Employer Initiated Change Request							
Employe	r Initiated Request for Change	s in Registered Details - Form-0)1 C				* Required Fields	
ESIC Code	Number Of Employer:*	330005471100006	33000547110000699					
Select a Property to Edit:*		Name of Factory	Name of Factory / Establishment			✓ Edit		
Name of th	e* 💿 Factory 🔍 Establ	ishment A G TRANSMISSI	A G TRANSMISSIONS					
Complete	Postal Address of Factory / Estal	olishment						
Address :*		PLOT NO 5		Pin Code:*		416101		
		L K AKIWATE IND	USTRIES	Phone No.:	-			
		JAYSINGPUR		Mobile No.:	91 -	8793023825		
State:*		Maharashtra	~	Fax No.:	-			
District:*		Kolhapur	~	Email:	sachinbhosale17	e17413@gmail.cc		
Police Station:*		JAYSINGPUR						
O Income Tax PAN No. O GIR No		AAFFA2705B		Income Tax Ward Circle Area				
Name Of								
Town Revenue Village		JAYSINGPUR		Taluk O Tehsil	SHIROL			
Hudbast No Revenue Demarcation				Municipality: Ward: *	JAYSINGPUR			
Constitution of Ownership:* (Attach copy of memorandum & articles of Association/Partnership Deed/Resolution):				Partnership Firms	Partnership Firms			
Name/Add Society :*	ress(s) of Present Proprietor/Mana	aging Directors/Managing Partners/	Click Here to Enter Details	Click Here to Enter Details				
Detai	ls of Bank Accou	nt						
Select	Account No*	Name of Bank*	Name of the Branc	h* MICR Code of the Ba	ank/Branch*	IFSC Code of the Bar	k/Branch*	
	14490500002210	Bank Of Baroda	Udgaon	416012153		BARB0UDGAON		
		<u>^</u>	Add Rows F	Remove				