					Form						
						'8 (2) (d)					
					Register	of fines					
Name and address of contractor : SOLUTIONS FACILITY SERVICES 4/36, SHIVSAGAR CHS LTD.SHIVSAGAR CHS , RDP II, SECTOR NO.1, CHARKOP, KANDIVALI (WEST),MUMBAI – 400 067				Nature and location of work: MANPOWER SUPPLY/ DELHI (MAYAPURI)			Name and address of Establishment in/under which contract is carried on: Hippostores Technology Pvt. Ltd. LPLOT NO- 97, BLOCK-C, PHASE II, MAYAPURI INDUSTRIAL AREA, WEST DELHI, DELHI, 110064		Name and address of the principal employer: Hippostores Technology Pv Ltd. LPLOT NO- 97, BLOCK-C, PHASE II, MAYAPURI INDUSTRIAL AREA, WEST		
Лο	nth: 01 NOV- 30) NOV Y	'ear : 2023								
	Name of Workman	Father's /Husband's Name	Designation/Nature of employment	Act/Omission for which Fine is	Date of Offence	Whether workman showed cause	Name of person in whose presence employee's explanation was	Wgae periods and wages payable	Amount of fine imposed	Date on which fine realised	Remarks

NO FINES IN MONTH OF 01 NOV-30 NOV-23



Signature and Seal Page 1 of 1