FORM No. 27
[See paragraph 9(2) of Schedule II to rule 131]

Health Register

Sr No.	Department of works	Name of worker	Age at last birthday	Date of employment on present work	Date of leaving or transfer (with reasons for discharge or transfer)	Nature of job or occupation	Raw material or by-products handled	Date of weekly examination with result (fit/unfit)	Nature of symptoms	Signature of registered medical practitioner
1	2	3	4	5	6	7	8	9	10	11

30. [Accident and dangerous occurrences (see Explanatory note 'P'(1)] (a) Total number :

Categories	Accident involving														
		ily non-fatal in xplanatory no		Fatal injuries as well as non-fatal injuries See Explanatory note 'P' (2)											
		Number of		Number of .											
	Accidents/	Pers	ons injured	Accidents/	Perso	ons injured	Persons killed								
	occurrences	Inside the factory	Outisde the factory	occurences	Inside the factory factory		Inside the factory	Outside the factory							
1	2	3	4	5	6	7	8	9							
 Accidents including dangerous occurrences and major accidents involving injuries/deaths Dangerous occurrences not involving injuries/death Dangerous occurrence involving injuries/deaths *4. Major accidents involving injuries/deaths 															
*5. Major accidents not involving injury/death															

^{*} See Explanatory note 'P' (3)

(b) For injuries occuring inside the factory:

Number of injuries occuring in

Hazardous p	process unde	r section 2(cb)	Dangerous	operations u	nder section of	Others					
	Number of			Numbers of	of	Number of					
Accidents	Accidents Persons injured			Persor	ns injured	Accidents	Persons injured				
	Fatal	Non-fatal	-	Fatal	Non-fatal		Fatal	Non-fatal			
1	2	3	4	5	6	7	8	9			

43. Injuries compensated (occupation wise)

Name of occupation	Number of injuries in respect of which final compensation has been paid during the year (see Explanatory note 'T')											Amount of compensation paid Rs. (see Explanatory noite 'U')								
		Death			Permanent disablement			Temporary disablement (see Explanatory note 'V')			Death			ermar sabler		Te dis (see r	t			
	Adults Young persons Adults Young persons Total		Adults	Young persons	Total	Adults	Young persons	Total	Adults	Young persons	Total	Adults	Young persons	Total						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19		

44. Occupational diseases (occupation wise) (See Explanatory note 'W')

Name of occupation	Nature of disease (See Explanatory note 'X')		iı	n resp	See E ect of	Explana which	atory no final co	iseases Amount of compensation paid Rs. (See Explanatory note 'U') pmpensation the year											
		Death			Permanent Disablement (see Explanatory note 'V')			Temporary Disablement			Death			Permanent Disablement			Temporary Disablement (see Explanatory note 'V')		
		Adults	Young persons	Total	Adults	Young persons	Total	Adults	Young persons	Total	Adults	Young persons	Total	Adults	Young persons	Total	Adults	Young persons	Total
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Total																			