

7	134(1)	Whether Combined Annual Returns in Form 20 submitted?		
8		Whether action has been taken to display posters relating to health safety and welfare of the workers?		

**GOVERNMENT OF KARNATAKA  
DEPARTMENT OF FACTORIES, BOILERS, INDUSTRIAL SAFETY AND HEALTH**

Date: .....

**Form-II  
Certificate issued for having admitted under The Karnataka State Factories  
Self Certification Scheme-2024**

1	<b>Name and address of the Factory</b>	
	Phone No.	
	Mobile No.	
	Email.	
	Fax No.	
	Website	
2	<b>Name of Occupier of the Factory</b>	
	Phone No.	
	Mobile No.	
	Email.	
	Fax No.	
3	Licence no.	
4	Nature of Manufacturing Process	
5	Licensed No. of workers	

This is certify that the above factory has been admitted for the Karnataka State Factories Self Certification Scheme-2024 for a period of five years from date: \_\_\_\_\_ to date: \_\_\_\_\_ subject to the condition stipulated under the said scheme.

Signature of the Chief Inspector

Date:

Place: