

FORM -V

(See rule 21 (2))

Form of Certificate by Principal Employer

Certified that I have engaged the applicant (IPRA SECURITY SOLUTION PVT. LTD.)

as a contractor in my establishment, I undertake to be bound by all the provisions of the contract Labor Regulation and Abolition Act 1970, and the contract Labor (regulation and Abolition) (New Delhi) in so far as the provisions are applicable to me in respect of the employment of contract labor by the applicant in our establishment.

Signature of principal employer:

Name and address of the establishment:

Emergency No.: 6620 6620



Orthopaedic



Neuro &
Spine



Trauma
Centre



ENT &
Cochlear
Implant



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Medicine



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& Kidney
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Gastro &
Hepatobiliary
Sciences



General &
Laparoscopic
Surgery



Bariatric
Surgery



Physiotherapy