

EXTRAORDINARY

PUBLISHED BY AUTHORITY

No. 1482 CUTTACK, THURSDAY, AUGUST 8, 2019/SRAVANA 17, 1941

LABOUR & ESI DEPARTMENT NOTIFICATION

The 6th August 2019

No. 4487--LESI-LL1-III-0002/2018-LESI- In exercise of the powers conferred by Section 14 of the Unorganized Workers' Social Security Act,2008 (Act 33 of 2008), the State Government do hereby make the following rules to amend the Odisha Unorganized Workers' Social Security Rules, 2010, namely:-

1. (1)These rules may be called the Odisha Unorganized Workers' Social Security (Amendment) Rules, 2019.

(2) They shall come into force on the date of their publication in the Odisha Gazette.

2. In the Odisha Unorganized Workers' Social Security Rules, 2010 (hereinafter referred to as the said rules), in rule 2, after clause (b), the following clauses shall be inserted, namely: -

" (b-1) 'Dependent' means spouse of the beneficiary, the minor sons and unmarried daughters of the beneficiary and the parent of the male spouse solely dependent on the beneficiary;

(b-2) 'Family' means the beneficiary, the spouse and the unmarried children ;

(b-3) 'Fund' means the Odisha Unorganized Workers' Social Security Board Fund."

3. In the said rules, rule 8 shall be renumbered as sub-rule(1) thereof and after sub-rule (1) so renumbered, the following sub-rule shall be inserted, namely:-

"(2)The State Board shall, -

(i) recommend the State Government in formulating suitable schemes for the different sections of the unorganized workers;

(ii) advice the State Government on such matters arising out of the administration of this act as may be referred to it;

(iii) monitor such social welfare schemes for unorganized workers as are administered by the State Government;

(iv) review the record keeping functions performed at the district level;

(v) review the progress of registration and issue of identity cards / distribution of benefits to the unorganized workers;

(vi) review the expenditure from the funds under various schemes;

(vii) undertake such other functions as are assigned to it by the State Government, from time to time.

(3) The State Board may, with the approval of the State Government, outsource the operational work such as maintenance of beneficiary records, issuance of identity cards, and registration fee, and such other works as may be necessary for implementation of welfare measures".

4. In the said rules , after Rule 11, the following rules shall be inserted, namely:-

"11-A. **Appointment and functions of the Chief Executive Officer**.- (1)For efficient functioning of the State Board, the following officers and other employees shall render assistance for its day-to-day activities, namely:-

(i)**The Chief Executive Officer** (CEO) of the State Board shall be normally the Labour Commissioner, Odisha or any other officer not below the rank of the Labour Commissioner, Odisha as may be appointed by the State Government, from time to time.

(ii) The Labour Commissioner, Odisha shall make available to the State Board such officers and staff as may be necessary for discharge of the functions under the Act till regular arrangement of the said employees is made.

(2) The salaries and other allowances of the officers and other staff of the State Board shall be such as may be decided by the State Government, from time to time.

11-B. **Budget of the State Board** - The Chief Executive Officer shall cause the budget estimates of the fund containing estimated receipt and expenditure for every financial year to be prepared and laid before the StateBoard bythe31st January of everyyear and theStateBoard shall approve the budget before the 31st March for which the details of all immovable and movable assets of the State Board including the bank deposits, expenditure incurred on welfare schemes, administration and other subheads against the current year's approved budget, and a detailed progress report on the functioning of the State Board during the current year, shall be placed before the State Board for consideration after which the budget shall be placed before the State Government for final approval.

11-C. **Operation of the Bank Account**.- The Chief Executive Officer of the State Board shall open a Savings Bank Account in a Nationalized Bank in the name of the Odisha Unorganized Workers' Social Security Board. Loan, advance or anyfund received from the Government of India or State Government or from any other source shall be deposited in the said bank account. The accounts shall be operated by the Chief Executive Officer (CEO) of the State Board.

11-D.Sanction and drawl of funds and the annual report. -

(1) All administrative expenditures up to Rs. 5,00,000 at a time shall be sanctioned and drawn under the signature of the Chief Executive Officer and such expenditure in excess of Rs.5,00,000 at a time shall be approved by the Member-Secretary prior to disbursement by the CEO of the State Board and such financial power of the CEO and the Member-Secretary shall be altered by the State Board when felt necessary.

(2) The CEO will ensure opening of an account at the district level which shall be operated jointly by the Collector and the District Labour Officer.

(3) All expenditure including distribution of benefits under the State Board shall be sanctioned by the Collector. Expenditure up to Rs. 5,000 at a time shall be drawn under the signature of the District Labour Officer and all expenditure in excess of Rs. 5,000 at a time shall be made by the Collector and the District Labour Officer jointly.

(4) The accounts of the bank shall be reconciled once in every quarter with the Cash Book of the State Board. The consolidated debits and credits of bank account shall tally with the income and expenditure of the fund. A bank reconciliation statement shall be made at the end of every quarter to explain inconsistencies between the fund account maintained in the State Board and the bank accounts.

(5) The CEO shall ensure that the accounts of the State Board on all expenditure and receipt shall be maintained on the 31st March of each year.

(6) The CEO shall ensure that the income and expenditure of the State Board shall be audited annually.

(7)The CEO of the State Board shall prepare an annual report in a descriptive form explaining welfare and other activities of the State Board during the financial year and submit the same to the appropriate Governments along with the Auditor's Report and Balance Sheet, duly approved by the State Board".

5. In the said rules, for Rule 13, the following rule shall be substituted, namely:-

"13. Registration of beneficiaries-(1) Registration of beneficiaries and record keeping functions shall be performed by the district administration through the officers of Labour & E.S.I. Department or such other officer as Government may notify, from time to time, in the respective rural and urban areas.

(2) The Panchayat Samities and Urban Local Bodies will function as Workers Facilitation Centers.

(3) Every unorganized worker who has completed eighteen years of age, but has not completed sixty years of age, and who has been engaged in any unorganized sector or work shall be eligible for registration as a beneficiary under the Act and these Rules.

(4) An application for registration with self-certification shall be made in **Form-I** to the Registering Authority.

(5) Renewal of the registration shall be done by the Registering Authority for 3 years at a time. No fees shall be collected for registration and renewal.

(6) Every registration made under sub-rule (4) shall be renewed after a period of three years. The renewal of membership shall be made in **Form-II** so as to reach the Registering Authority not later than 30 days before the date of its expiry.

(7) The workers such as street vendors, small traders, domestic workers, rickshaw pullers, auto drivers, cobblers, agricultural and forest workers, newspaper hawkers, scavengers working in unorganized sector shall be registered under the State Board, in the first phase. The State Government may extend the coverage of beneficiaries of other categories, from time to time.

(8) If the Registering Authority is satisfied that the applicant has complied with the provisions of the Act and the Rules made thereunder, he shall register or renew the name of the unorganized worker as a beneficiary under the Act and Rules made thereunder.

(9) If the Registering Authority is satisfied that the registration is obtained by misrepresentation, fraud or suppression of any fact, the Registering Authority may revoke, suspend or cancel the registration after giving an opportunity of being heard to the registered unorganized worker.

(10) If any fraud is detected after availing of any benefit by any registered unorganized worker, that benefit shall be recovered from him or her.

(11) Any person aggrieved by the decision under sub-rule (9) may, within 30 days from the date of such decision, prefer an appeal to the appellate authority who may entertain such an appeal if he is satisfied that the unorganized worker was prevented by sufficient reasons from filing the appeal in time.

Explanation.- The Government may notify any officers above the rank of the 'Registering Authority' as the 'Appellate Authority' to hear and decide the appeal petition under sub-rule (12).

(12) If a beneficiary is in default of renewal after a period of three years, he shall cease to be a beneficiary of the State Board:

Provided that the membership may be renewed with the permission of the CEO or any officer authorized by him in this behalf subject to the condition that such renewal shall not be allowed more than two times:

Provided further that an application for registration or renewal shall not be rejected without giving the applicant an opportunity of being heard.

(13) Where a scheme requires the Central or State Government to make a contribution, the Board may submit proposal to the State Government for consideration."

6. In the said rules, after Rule 13, the following rules shall be inserted, namely:-

"14.Nomination.- (1) Every unorganized worker shall, at the time of making the application for his or her registration with the Registering Authority, make a nomination in Form-III, for the purpose of delivery of benefits in case of death.

(2) If an unorganized worker has a family at the time of making a nomination, the nomination shall be made in favour of one or more members of his family, and any nomination made by such unorganized worker in favour of a person who is not a member of his family shall be void.

(3) A nomination made in **Form III** may be modified by an unorganized worker at any time after giving a written notice of his or her intention to do so to the concerned Registering Authority of the area.

(4) If a nominee predeceases the unorganized worker, such worker shall submit a fresh nomination in **Form-III**.

15.Register of beneficiaries.-The Registering Authority issuing Identity Cards shall maintain or cause to maintain a register in **Form-IV**showing the particulars of the beneficiaries.

16.Identity cards.-(1) The Registering Authority shall issue Identity Cards in Form-V to every unorganized worker or beneficiary with his or her photograph duly affixed thereon.

(2) A beneficiary who has been issued an Identity Card under this rule shall produce the same whenever demanded by any authorized officer of the Government.

(3) In case the Identity Card is lost, destroyed or defaced, a duplicate identity card shall be issued by the Registering Authority on an application made to him by the registered unorganized worker.

17. Dual membership and dual benefits.-No unorganized worker registered under these rules shall be entitled for deriving other benefit similar to the benefit provided under this Act.

18. Scheme implementing machinery.-Each department or agency implementing a social security scheme contained in Scheduled-I to the Act for a particular scheme of unorganized sector shall continue to implement such scheme for such workers:

Provided that the unorganized workers not covered under the schemes contained in Scheduled I to the Act shall be covered under any other schemes formulated by the Labour & Employees'State Insurance Department, from time to time."

7. In the said rules, **for Form -I**, the following Forms shall be substituted, namely:-

FORM I (ଫର୍ମ – ୧)

[See Rule 13(4)] [ନିୟମ ୧୩(୪) ଦେଖନ୍ତୁ] APPLICATION FOR REGISTRATION OF UNORGANISED WORKER AS BENEFICIARY UNDER ODISHA UNORGANISED WORKERS' SOCIAL SECURITY BOARD

(ଓଡ଼ିଶା ଅଶସଂଗଠିତଶ୍ରମିକସାମାଜିକସୁରକ୍ଷାବୋର୍ଡ଼ରେ ଅଣସଂଗଠିତଶ୍ରମିକ ପଞ୍ଚିକରଣ ନିମନ୍ତେ ଆବେଦନପତ୍ର)

То

The Registering Officer / ପଞ୍ଜିକରଣ ଅଧିକାରୀ,

1.	Full name of the Unorganised Worker (ଅଶସଂଗଠିତଶ୍ରମିକଙ୍କ ପୂରା ନାମ)	:
2.	Father's/ Husband's name(ପିତା / ସ୍ୱାମୀଙ୍କ ନାମ)	:
3.	Gender (ଲିଙ୍ଗ)	: (Male / Female / Transgender) / (ପୁରୁଷ / ମହିଳା / ତୃତୀୟଲିଙ୍ଗ)
4.	Date of Birth/Age as on the date of application (Proof in the form of Birth Certificate / Educational Certificate showing date of birth / driving license / passport / Aadhaar card / Voter ID) (ଆବେଦନ କରିବାତାରିଖସୁଦ୍ଧାଜନ୍ତତାରିଖ/ ବୟସ)	:
	(ପ୍ରମାଣସ୍ୱରୂପ ଜନ୍ଲ ପ୍ରମାଶପତ୍ର / ଜନ୍ଳତାରିଖଲେଖାଥିବାଶିକ୍ଷାଗତ ପ୍ରମାଶପତ୍ର / ଡ୍ରାଇଭିଙ୍ଗ୍ଲାଇସେନ୍ସ / ପାସପୋର୍ଟ / ଆଧାରକାର୍ଡ଼ / ଭୋଟ ପ୍ରମାଶପତ୍ର)	
5.	Mobile Number, if any (ମୋବାଇଲ୍ ନୟର, ଯଦି ଥାଏ)	:
6.	Aadhaar Number (ଆଧାର ନୟର)	:
7.	Address of the Applicant (ଆବେଦନକାରୀଙ୍କ ଠିକଣା)	
	(a) Present Address (ବର୍ତ୍ତମାନର ଠିକଶା)	
	i. House / Building No. (ଘର / କୋଠା	:
	ii. Village/Town/City	:
	iii. G.P./ Ward (ଗ୍ରାମ ପଞ୍ଚାୟତ / ଖ୍ୱାର୍ଡ଼ି)	:
	iv. Post Office (ଡାକ ଘର)	:
	v. Block/ Municipality/ NAC (ବୁକ /ମୁନିସ୍ପାଲିଟି/ଏନ୍.ଏ.ସି.)	:
	vi. Police Station (ଥାନା)	:
	vii. District (କିଲ୍ଲ)	:

vii	ii. Pin Code (ପିନ୍କୋଡ଼)				:		
(b)) Permanent Address (ସ୍ଥାୟୀ ଠିକଣା)	:				
i. I	House / Building No. (9	ଘର / କୋଠା	ସଂଖ୍ୟା)		:		
ii.	Village/Town/City (ଗ୍ରା	ମ / ସହର /	ନଗର)		:		
iii.	G.P./ Ward (ଗ୍ରାମ ପଞ୍ଚ	ଃ ାୟତ / ଖ୍ୱାର୍ଡ଼ି))		:		
iv.	Post Office (ଡାକଘର)				:		
v.	Block/ Municipality/ N	IAC (ବୁକ /	ମୁନିସ୍ପାଲି	ଟି / ଏନ୍.ଏ.ସି.)	:		
vi.	Police Station (ଥାନା)				:		
vii	i. District (ଜିଲ୍ଲା)				:		
vii	ii. Pin Code (ପିନ୍କୋଡ଼)				•		
8. Ca	ntegory (ବର୍ଗି)					./OBC/ Others (ସି/ଓବିସି/ଅନ୍ୟ)	
9. Ed	lucation qualification (ଶିକ୍ଷାଗତ ଯୋ	ଗ୍ୟତା)		•		
10. Oc	ccupation (ବୃ ତ୍ରି)				:		
11. (A	.) (i) Whether self-empl	loyed? (ଆ	ଦ୍ମନିଯୁକ୍ତକି ?) : (Yes/No)	:		
) If yes, income per day ାଦି ହଁ, ଦୈନିକ / ମାସିକଆୟ	-	h		:		
) (i) If working for an e esent employer (ଯଦି କୈ	1 .			:		
ତେ	ବବେ ବ ର୍ତ୍ତ ମାନ ନିଯୁକ୍ତିଦାତାଙ୍କ	ନାମ ଓ ଠିକ	SII)				
(ii)	(ii) Wages per day/per month (ଦୈନିକ / ମାସିକ ମଜୁରୀ) :						
12. De	ependents (ଆର୍ଶ୍ୱିତବ୍ୟକ୍ତି) :				:		
Sl.	Name of the	Sex	Age	Relationshi	p with	Class in which	

1	2	3	4	5	6
					(ଶିଶ୍ୱମାନଙ୍କ ପାଇଁ)
କ୍ର.ନଂ.	ଆଶ୍ରିତବ୍ୟକ୍ତିର ନାମ			ହିତାଧିକାରୀଙ୍କ ସହ ସମ୍ପର୍କ	(for children) କେଉଁ ଶ୍ରେଣାରେ ପଦ୍ଭଛନ୍ତି
No.	dependent	ଲିଙ୍ଗ	ବୟସ	beneficiary	studying
Sl.	Name of the	Sex	Age	Relationship with	Class in which

13. The applicant's Savings Bank Account No. with name and address of the : bank (compulsory for registration of the beneficiary, without which the application will not be entertained)
ଆବେଦନକାରୀଙ୍କ ସ ଞ୍ଚ ୟ ବ୍ୟାଙ୍କ ଆକାଉ ଣ୍ଟ ନୟର ସହିତବ୍ୟାଙ୍କର ନାମ ଓ ଠିକଣା (ଏହା
ପଞ୍ଜିକରଣ ନିମନ୍ତେ ବାଧ୍ୟତାମୂଳକ ଅଟେ, ଏହାବ୍ୟତୀତ ଆବେଦନପତ୍ର ବିଚାରକୁ ନିଆଯିବ ନାହିଁ)
14. Whether the applicant owns a house/site in his/her or spouse's name ? If so, : give details, like survey No., locality, village/town ଆବେଦନକାରୀଙ୍କ ନିଜର କିୟା ସ୍ୱାମୀ/ସ୍ଥୀଙ୍କ ନାମରେ ଗୃହ କିୟା ଭୂମି ଅଛିକି ? ଯଦି ଅଛି, ତାହାର
ସମ୍ପୂର୍ଣ୍ଣ ବିବରଣୀ ଯଥା ସର୍ଭେ ନୟର, ଜାଗା, ଗ୍ରାମ / ସହର
15. (a) Whether the applicant is a member of ESI? : (ଆବେଦନକାରୀ କର୍ମଚାରୀ ରାଙ୍ଗ୍ୟବୀମାର ସଭ୍ୟକି) Yes/No (ହଁ/ ନା)
(b) If yes, Regn. No. (ଯଦି ହଁ, ପଞ୍ଜିକରଶ ସଂଖ୍ୟା) :
16. (a) Whether the applicant is a member of EPF? : (ଆବେଦନକାରୀ କର୍ମଚାରୀ ଭବିଷ୍ୟନିଧି ପାଣ୍ଠିର ସଭ୍ୟକି ?) Yes/No (ହଁ/ ନା)
(b) If yes, Registration No(ଯଦି ହଁ, ପଞ୍ଜିକରଣ ସଂଖ୍ୟା) :
17. Whether the applicant is registered under OB&OCWWB : Yes/No (ହଁ/ ନା) (ଆବେଦନକାରୀ ଓଡ଼ିଶା କୋଠାବାଡ଼ି ଓ ଅନ୍ୟାନ୍ୟ ନିର୍ମାଣ ଶ୍ରମିକ କଲ୍ୟାଣ ବୋର୍ଡ଼ର ସଭ୍ୟକି ?)
18. Whether the applicant avails any benefit under any other : Yes/No (ହଁ/ ନା) Government schemes: If Yes, specify details (ଆବେଦନକାରୀ ଅନ୍ୟ କୌଣସି ସରକାରୀ ଯୋଜନାରୁ ଅନ୍ୟ କିଛି ସହାୟତା ପାଇଛନ୍ତି କି ? ଯଦି ହଁ, ତାହାର ସମୟ ବିବରଣୀ)
19. Name of the nominee to receive the benefits in the event of : the demise of the applicant (ମନୋନୀତ ବ୍ୟକ୍ତିଙ୍କ ନାମ, ଯିଏକି ଆବେଦନକାରୀଙ୍କ ମୃତ୍ୟୁ କ୍ଷେତ୍ରରେ ସହାୟତା ଗ୍ରହଣ କରିବେ)

SELF-DECLARATION (ନିଜସ୍ୱ ଘୋଷଣାନାମା)

I do hereby certify that I am an unorganized worker and the above information is true to the best of my knowledge and belief. Further I certify that I do not belong to any other Welfare Board/ Fund and I have not availed any benefit under any similar Welfare Board /Fund /Government Schemes.

ଏତଦ୍ୱାରା, ମୁଁ, ମୋର ପୂର୍ଣ୍ଣାଙ୍ଗଜ୍ଞାନ ଓ ବିଶ୍ୱାସର ସହିତ ଘୋଷଣା କରୁଅଛି କି ଯେ ମୁଁ ଜଣେ ଅଶସଂଗଠିତଶ୍ରମିକ ଅଟେ ଏବଂ ମୋ ଦ୍ୱାରା ଦିଆଯାଇଥିବା ଉପରଲିଖିତ ସମସ୍ତ ତଥ୍ୟ ସମ୍ପୂର୍ଣ୍ଣ ସତ୍ୟ ଅଟେ । ପୁନଙ୍କ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ଅନ୍ୟ କୌଣସି କଲ୍ୟାଣ ବୋର୍ଡ଼ / ପାଣ୍ଠି ର ସଦସ୍ୟ ନୁହେଁ କିମ୍ବା ମୁଁ କୌଣସି ସମାନ ପ୍ରକାର କଲ୍ୟାଣ ବୋର୍ଡ଼ / ପାଣ୍ଠି/ ସରକାରୀ ଯୋଜନାରୁ କୌଣସି ସହାୟତା ପ୍ରାପ୍ତ ହୋଇନାହିଁ ।

Place (ସ୍ଥାନ) : Date (ତାରିଖ) :

> Signature/ thumb impression of the applicant worker ଆବେଦନକାରୀ ଶ୍ରମିକଙ୍କ ଦସ୍ତଖତ / ଟିପଚିହ୍ନ

Notes – Affix one passport size photo in the application and enclose two photos along with application in a separate cover :

ବି.ଦ୍ର. – ଆବେଦନ ପତ୍ରରେ ଗୋଟିଏ ପାସ୍ପୋର୍ଟ ସାଇଜ୍ ଫଟୋ ଏବଂ ଦୁଇଗୋଟି ପାସ୍ପୋର୍ଟ ଫଟୋ ଆବେଦନପତ୍ର ସହିତ ପୃଥକ ଖୋଳରେ ସଂଲଗ୍ଧ କରନ୍ତୁ ।

FOR OFFICE USE

(କାର୍ଯ୍ୟାଳୟବ୍ୟବହାର ପାଇଁ)

The above application has been verified, accepted and registered vide Registration No.

(ଉପରୋକ୍ତ ଦରଖାସ୍ତ ଯାଂଚ କରାଯାଇ ଗ୍ରହଣ କରାଗଲା ଏବଂ ପଞ୍ଜିକରଣ ସଂଖ୍ୟାରେ ପଞ୍ଜିକୃତ କରାଗଲା)

Place (ସ୍ଥାନ) :

Date (ତାରିଖ) :

Signature, Designation and Seal of the Registering Officer ପଞ୍ଜିକରଣ ଅଧିକାରୀଙ୍କ ଦସ୍ତଖତ, ପଦବୀ ଏବଂ ମୋହର

FORM II (ଫର୍ମ – ୨) [See Rule 13 (6)] [ନିୟମ ୧୩(୬) ଦେଖନ୍ତୁ] Application for renewal of membership ସଭ୍ୟପଦ ନବୀକରଣ ପାଇଁ ଆବେଦନପତ୍ର

1.	Registration No. (ପଞ୍ଜିକରଣ ସଂଖ୍ୟା)	:
2.	Name of the worker (ଶ୍ରମିକଙ୍କ ନାମ)	:
3.	Father's / Husband's Name (ପିତା / ସ୍ୱାମୀଙ୍କ ନାମ)	:
4.	Gender (ଲିଙ୍ଗ)	[:] (Male / Female / Transgender) / (ପୁରୁଷ / ମହିଳା / ତୃତୀୟଲିଙ୍ଗ)
5.	Date of Birth/ Age (ଜନ୍ନତାରିଖ / ବୟସ)	:
6.	Mobile No., if any (ମୋବାଇଲ୍ ନୟର, ଯଦି ଥାଏ)	:
7.	Aadhaar No. (ଆଧାର ନୟର)	:
8.	Present Address (ବ ର୍ର୍ ମାନ ଠିକଣା)	:
9.	Permanent Address (ସ୍ଥାୟୀ ଠିକଶା)	:
10.	Present place of work (ବ ର୍ତ୍ତ ମାନ କାର୍ଯ୍ୟସ୍ଥଳୀର ନାମ)	:
11.	Occupation (ବୃ ର୍ଭ)	:
12.	Bank Account No. with details (ବ୍ୟାଙ୍କ ଆକାଉ ଣ୍ଟ ସଂଖ୍ୟା ଏବଂ ତାହାର ସବିଶେଷ ବିବରଣୀ)	:

Place (ସ୍ଥାନ) : Date (ତାରିଖ) :

Signature of the applicant/ Thumb impression ଆବେଦନକାରୀଙ୍କ ଦୟଖତ / ଟିପଚିହ୍ନ

FORM III (ଫର୍ମ – 3) [See Rule 14 (1)(3) and (4)] [ନିୟମ ୧୪(୧)(୩) ଓ (୪) ଦେଖନ୍ତୁ]

Change of Nomination ମନୋନୟନ ପତ୍ରର ପରିବ**ର୍ତ୍ତ**ନ

I do hereby nominate the name(s) of person / persons for change of nomination as detailed below to receive all my dues on my behalf under the Unorganized Workers' Social Security Act, 2008 or the Unorganised Workers' Social Security Amendments Rules, 2019 or the schemes made there under, in the event of my death.

ମୁଁ, ନିମ୍ନଲିଖିତ ବ୍ୟକ୍ତି / ବ୍ୟକ୍ତିମାନଙ୍କୁ ମୋର ମନୋନୀତ ଉ**ତ୍ତ**ରାଧିକାରୀଭାବେ ପରିବ**ର୍ଭ**ନ କରିବା ନିମନ୍ତେ ମନୋନୀତ କରୁଛି, ଯେଉଁମାନେ ମୋର ମୃତ୍ୟୁ ଷେତ୍ରରେ ଅଶସଂଗଠିତ ଶ୍ରମିକ ସାମାଜିକ ନିରାପ**ର୍ଭ**ା ଆଇନ, ୨୦୦୮ କିୟା ଅଣସଂଗଠିତ ଶ୍ରମିକ ସାମାଜିକ ନିରାପ**ଭ**ା ସଂଶୋଧନ ନିୟମ, ୨୦୧୯ କିୟା ଏହା ଅନ୍ତର୍ଗତ ଯୋଜନାରେ ମୋର ସମଞ ପ୍ରାପ୍ୟ / ସହାୟତା ରାଶି ଗ୍ରହଣ କରିବେ ।

Name and address of the nominee(s) ମନୋନୀତବ୍ୟକ୍ତି / ବ୍ୟକ୍ତିମାନଙ୍କ ନାମ ଓ ଠିକଣା	Relationship of the nominee with the registered worker ପଞ୍ଜିକୃତ ଶ୍ରମିକଙ୍କ ସହିତ ସମ୍ପର୍କ	Age of the nominee(s) ମନୋନୀତ ବ୍ୟକ୍ତି / ବ୍ୟକ୍ତିମାନଙ୍କ ବୟସ	Amount of share given to each nominee ପ୍ରତ୍ୟେକ ମନୋନୀତବ୍ୟକ୍ତିଙ୍କୁ ଦିଆଯାଇଥିବା ରାଶିର ପରିମାଣ
1	2	3	4

Place (ସ୍ଥାନ) : Date (ତାରିଖ) :

> Signature of the applicant/ Thumb impression ଆବେଦନକାରୀଙ୍କ ଦୟଖତ / ଟିପଚିହ୍ନ

FORM IV (ଫର୍ମ – ୪) (See Rule 15) (ନିୟମ – ୧୫ ଦେଖନ୍ତୁ)

Register of beneficiaries

<u>ି</u>ହିତାଧିକାରୀରେଜିଷ୍ଟର

Sl.	Full name of the	Fathers name/	Date of	Gender	Present	Permanent	Nature of	Regist	Name of	Photo-	Signature	Signature /	Rem
No.	unorganized worker	Husbands	birth	ଲିଙ୍ଗ	address	address	work in	ration	the	graph	of the	Thumb	arks
କ୍ର.ନଂ.	ଅଣସଂଗଠିତ ଶ୍ରମିକଙ୍କ ପୂରା ନାମ	name	ଜନ୍ମତାରିଖ		ବର୍ତମାନ ଠିକଣା	ସ୍ଥାୟୀଠିକଶା	which	No.	Nominee	ଫଟୋଗ୍ରାଫ୍	Register	impression	ମନ୍ତବ୍ୟ
		ପିତା / ସ୍ୱାମୀଙ୍କ ନାମ					engaged	ପଞ୍ଜିକରଣ	ମନୋନୀତବ୍ୟ		ring	of the	
							କେଉଁ ପ୍ରକାର	ସଂଖ୍ୟା	କ୍ତିଙ୍କ ନାମ		Officer	registered	
							କାର୍ଯ୍ୟରେ				ପଞ୍ଜିକରଣ	worker	
							ନିୟୋଜିତ				ଅଧିକାରୀଙ୍କ	ପଞ୍ଜିକୃତ ଶ୍ରମିକଙ୍କ	
							ହୋଇଛନ୍ତି				ସ୍ୱାକ୍ଷର	ସ୍ୱାକ୍ଷର / ଟିପଚିହ୍ନ	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

FORM-V [See Rule 16]						
SOCI (ଓଡ଼ିଶା ଅଣସଂଗ LABOUR & (ଶ୍ରମ ଓ କର୍ମଗ	AL SECURIT) ାଠିତ ଶ୍ରମିକ ସାମ ESI DEPARTM	ାଜିକ ସୁରକ୍ଷା ବୋର୍ଡ଼ି) 1ENT, ODISHA । ବିଭାଗ, ଓଡ଼ିଶା)				
	ପରିଚୟ ପତ୍ର					
Regd. No (ପଞ୍ଜିକରଣ ସଂଖ୍ୟା)		Date of Regd (ପଞ୍ଜିକରଣ ତାରିଖ)				
Name (ନାମ):						
Father / Husband's Name (ପିତା /	ସ୍ୱାମୀଙ୍କ ନାମ) :_					
Permanent Address (ସ୍ଥାୟୀ ଠିକଶା)						
Present Address (ବର୍ତ୍ତମାନ ଠିକଶା)	:					
Gender (ଲିଙ୍ଗ) :						
District (ଜିଲ୍ଲା) :						
Date of Birth / Age : (ଜନ୍ମ ତାରିଖ / ବୟସ)						
Marital Status (ବୈବାହିକ ସ୍ଥିତି):						
Occupation (ବୃତ୍ତି) :						

Category (ବର୍ଗି) (SC/ST/OBC/Others) :	
Whether home-based worker /	
Self-employed worker / Wage worker / Others :	
(ଘରୋଇ ଶ୍ରମିକ / ଆତ୍ମନିଯୁକ୍ତି ଶ୍ରମିକ / ଦିନ ମଜୁରିଆ / ଅନ୍ୟାନ୍ୟ ଶ୍ରମିକ)	

Aadhaar No.:
(ଆଧାର ସଂଖ୍ୟା)
Bank Account No. : (ବ୍ୟାଙ୍କ ଖାତା ସଂଖ୍ୟା)
Branch name with details : (ବ୍ୟାଙ୍କ ଶାଖାର ନାମ ଓ ବିବରଣୀ)
Mobile No. (If any) :

(ଦୂରଭାଷ ସଂଖ୍ୟା)

Signature / Thumb Impression of Worker (ଶ୍ରମିକଙ୍କ ଦୟଖତ / ଚିପଚିହ୍ନ) Signature / Seal Registering Officer (ପଞ୍ଜିକରଣ ଅଧିକାରୀଙ୍କ ଦୟଖତ / ମୋହର)

Place (ସ୍ଥାନ) :

Date (ତାରିଖ):

Instruction :

 In case of change of address, application in Form-I to be made before the concerned authority.
 Solution of the concerned authority.

```
ଠିକଣା ପରିବର୍ତ୍ତନ କ୍ଷେତ୍ରରେ, ସମ୍ପୃକ୍ତ ଅଧିକାରୀଙ୍କୁ ଫର୍ମ – ୧ ରେ ଦରଖାୟ କରିବାକୁ ହେବ
```

- Loss mutilation / unauthorized retention entail penal consequences.
 ଏହି ପରିଚୟ ପତ୍ରକୁ ହାନି / ବିକୃତି / ଅନାଧିକୃତ ଧାରଣ କ୍ଷେତ୍ରରେ ଆଇନଗତ କାର୍ଯ୍ୟାନୁଷ୍ଠାନ ଗ୍ରହଣ କରାଯିବ
- This card is not transferable.
 ଏହି ପରିଚୟ ପତ୍ରଟି ଅନ୍ତରଶୀୟ ନୁହେଁ

By order of the Governor

ANU GARG

Principal Secretary to Government