



**EMPLOYEES' STATE INSURANCE CORPORATION
PANCHDEEP BHAWAN CIG ROAD: NEW DELHI**

No: P-12/11/103/08-Rev.II

Dated:22.12.2009

The R.D./J.D.(I/Cs),
E.S.I.C.,
.....

**Subject:- Compliance in respect of employees employed by
immediate employer.**

Sir,

It has been observed that compliance involving contract workers engaged through immediate employer(contractor) is not forthcoming as per provisions of the Act and hence consequential denial of benefits. In this regard, Section 40, 41 and 44 of the E.S.I. Act categorically places responsibility on the principal employer to ensure compliance in respect of employees employed through immediate employers. This compliance must be ensured in one of the following ways:-

1. If the immediate employer is having an independent Code No., he should pay the contributions by a separate challan every month and submit the Return of contribution accordingly. In case the Immediate Employer happens to be defaulter, the principal employer in whose premises the workers were engaged, shall pay the contributions and submit the Returns and deduct the amount paid by the principal employer from any pending bills of the Immediate Employer.
2. If the immediate employer is not having independent Code Number, the principal employer shall pay the contribution on a separate challan mentioning the details of immediate employer for which the contribution is being paid.
3. In case of contractors working exclusively for a principal employer, the principal employer shall give them an unique identification number and payments shall be made on separate challans in respect of each immediate employer mentioning their unique identification number along with code number of principal

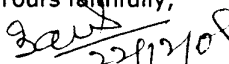
employer. The unique identification number shall not be treated as Code/Sub-Code Number.

The instructions mentioned above will apply in respects of the employees who are working in the premises of the principal employer. If the immediate employers are working from a different locations, payments will have to be made by a separate challan and Returns will have to be submitted to the respective Branch Offices. In such cases also, if the Immediate Employer happens to be a defaulter, the payment shall be made by the principal employer and the Returns will have to be signed by the Contractor and counter signed by the principal employer showing the code number of the principal employer.

The contents of this circular must be complied with in totality. The receipt of the letter may be acknowledged.

This issues with the approval of Insurance Commissioner.

Yours faithfully,


22/12/08

(A.P. TRIPATHI)

JOINTT DIRECTOR



**EMPLOYEES' STATE INSURANCE CORPORATION
PANCHDEEP BHAWAN CIG ROAD: NEW DELHI**

No: P-12/11/103/08-Rev.II

Dated: 22.12.2009

To

The R.D./J.D.(I/Cs),
E.S.I.C.,
.....

Subject:- **Allotment of Sub-code No.**

Sir,

It has been observed by seniors officers of Hqrs Office visiting various regions that different format of applications are available for allotment of Sub-Code No. in different Regions/Sub-Regions. Also it has been seen that a lot of delay takes in allotment of Sub-Code No. This has been viewed very adversely and it has been desired that the Sub-Code No. should be allotted to such applicants on the very day of application. For any delay in allotment of Sub-Code No. without reasonable explanation shall be viewed adversely by this office. To have a uniform approach, a proforma of application for employer is being enclosed along with this letter. The employer applying for Sub-Code No. should be requested to use this proforma and if the application contains all the information asked for, Sub-Code No. must be allotted on the same day.

The contents of this circular must be complied with in totality. The receipt of the letter may be acknowledged.

This issues with the approval of Insurance Commissioner.

Encl: As above.

Yours faithfully,

**(A.P. TRIPATHI)
JOINT DIRECTOR**

To

The R.D./J.D.(I/Cs),
E.S.I.C.,
.....

**APPLICATION FOR ALLOTMENT OF SUB-CODE NUMBER
AT REGIONAL OFFICE/SUB-REGIONAL OFFICE**

1.	Name & address of the Factory/Establishment										
2.	Code No. Allotted										
3.	Name & Address of Branch Office for which Sub-Code applied										
		PIN CODE (Mandatory)									
Telephone No.		Fax			Email id						
		PIN CODE (Mandatory)									
4.	Name, Designation & Address of Officer I/c or Person responsible for compliance with the provisions of ESI Act, 1948.										
5.	No. of employees at the above Branch										
6.	Local Bank A/c No.& Banker's address										
7.	Exact nature of activities/work being carried out at the above Branch										
8.	Date of opening of the above Branch Office										
9.	Address of the place where records are maintained & produced for inspection										
		PIN CODE (Mandatory)									

I hereby declare that the information furnished above is true and correct to the best of my knowledge and belief and I am authorized Officer/Person to sign the paper relevant to compliance/registration under ESI Act.

**Signature of Authorized Signatory
with Name & Designation**

Date: _____

Place: _____

List of documents to be enclosed:

1. C-11 copy issued from Regional Office/Sub-Regional Office
2. List of employees with their designation, date of joining & monthly wages drawn.