

**FORM NO. 14**  
(Prescribed under Rule 87)

**NOTICE OF PERIOD OF WORK FOR ADULT WORKERS**

Name of Factory	:	Registration No	:
Address	:	Licence No	:
District	:	*NIC Code No	:
First Day of Week	:	(As given in the licence)	

Periods of work	Men				Women				Identification of the Group		Remarks				
	Total number of Men Employed - _____				Total number of Women Employed - _____				Alphabet Assigned	Nature of work					
Groups Relays	A			B			C				D			A,B,C etc.	
	1	2	3	1	2	3	1	2	3	1	2	3	1		
On working days															
From ...															
To ...															
From ...															
To ...															
On Partial Working Day															
From ...															
To ...															
From ...															
To ...															

Date on which this notice is first exhibited :

\_\_\_\_\_  
Signature of Manager

Name