

**GOVERNMENT OF ODISHA
LABOUR & ESI DEPARTMENT**

RESOLUTION

Bhubaneswar, dated the 30.3.2016

No.LL-II-FM-13/2015/ 2577 /LESI. After careful consideration, the Government of Odisha is pleased to introduce a “**Self Certification Scheme**” for the factories established in the State for “**Ease of Doing Business**”.

1. **Objective:-** This Scheme aims at making the occupier conscious and truthful as a law abiding person willing to take care of the interest of the workers by complying with the provisions of the Factories Act, 1948.
2. **Applicability:-** This Self Certification Scheme shall be valid for all the factories coming under the Factories Act, 1948 and Rules made thereunder, except the factories covered under Section 2 (cb) and Section 87 of the Factories Act, 1948 and Rules framed thereunder and factories classified as MAH category as per The Orissa Factories (Control of Major Accident Hazard) Rules, 2001.
3. **Procedure for joining the Scheme:-** The scheme will be optional and the occupier of any factory intending to adopt this scheme shall apply in duplicate to the Director of Factories and Boilers, Odisha with a copy to the Deputy Director, Factories & Boilers of concerned Division and also to the Asst. Director of Factories and Boilers of the concerned zone in the proforma in **Form-I** along with the documents in detail. The occupier is also required to produce an Affidavit in the format in **Form-II**. Any discrepancy in the application or enclosures shall be communicated to the applicant within 30 days from the date of receipt of the application in the office of the Directorate of Factories and Boilers.

If no discrepancy is so communicated, the applicant shall be deemed to have been enrolled under the Self-Certification Scheme.

4. Filing of Return:- After being enrolled under the Self Certification Scheme, the concerned occupier shall file the Self-Certification Return in the prescribed Proforma in **Form-III** in duplicate to the Director, Factories & Boilers. The return shall be filed on any working day between 15th January to 15th February every year commencing with the succeeding year till expiry of the Scheme.

5. Validity of the Scheme:- The Scheme shall be valid till it is withdrawn or cancelled. The occupier shall file combined Annual Return in Form 21 of the Odisha Factories Rules, 1950 during the validity of Scheme. In the event of any fatal accident, the validity of the scheme will automatically cease to continue and the Occupier has to apply afresh to the authorities to join the scheme.

6. Option for quitting the Scheme:- If any occupier wants to quit the Scheme, he can do so at any time by giving one month's prior notice.

7. Penalty for submitting false information or violating the provision of the scheme:- If it comes to notice of Director, Factories and Boilers that the applicant has given false declaration or found not complying with provisions of the statute, legal action shall be initiated against the occupier and manager of the factory as per the provisions of Factories Act, 1948.

8. Inspection Procedure:- Twenty percent (20%) of the factories so covered under the "Self Certification Scheme" shall be selected at random for inspection once in a year to verify proper implementation of the provisions of Factories Act and rules made thereunder. However, in case of any accident or dangerous occurrence or specific complaint, inspection shall be carried out as per the provisions of Law.

This Resolution shall come into effect from the date of publication in the Odisha Gazette.

ORDER:

Ordered that the resolution be published in Odisha Gazette and copies thereof be forwarded to all concerned.

Enclosures:

Forms-I, II & III.

By order of the Governor

G. Srinivas

Principal Secretary to Government

Memo No. 2578 /LESI., dated the 30.3.2016

Copy forwarded to the Gazette Cell in charge, Odisha Gazette Cell, C/o- Commerce Department, Odisha Secretariat, Bhubaneswar with a request to publish the above Resolution in the next issue of the Odisha Gazette and supply 50 printed copies thereof to this Department.


Under Secretary to Government

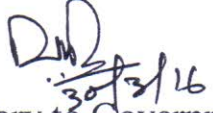
Memo No. 2579⁽²⁹⁾ /LESI., dated the 30.3.2016

Copy forwarded to all Departments of Government for information and necessary action.


Under Secretary to Government

Memo No. 2580⁽²⁹⁾ /LESI., dated the 30.3.2016

Copy forwarded to P.S. to Hon'ble Minister, Steel & Mines and Labour & ESI / Pr. P.S. to Principal Secretary to Government, Labour and ESI Department / All Heads of Department under the control of Labour & ESI Department / All Officers / All Sections of Labour & ESI Department for information and necessary action.


Under Secretary to Government

Memo No. 2581 /LESI., dated the 30.3.2016

Copy forwarded to State Head Portal, IT Centre, Secretariat Building, Bhubaneswar for information and necessary action. He is requested to upload the said Resolution in this Department Website.


Under Secretary to Government



Self Certification Scheme

APPLICATION FORM

To

The Director, Factories & Boilers,
Odisha, Bhubaneswar.

Subject:- Application to join under Self Certification Scheme.

Sir,

With reference to Resolution No..... dt. of Labour & ESI Department, I / We apply to join under the Self Certification Scheme. The Details of our establishment are as follows:-

- (i) Name, Designation & Address of the Owner. :
- (ii) Name and Address of the Factory :
- (iii) License No. issued by Director, Factories & Boilers. :
- (iv) Name and Present Address of the occupier :
- (v) Name and present address of the Factory Manager :
- (vi) Nature of the Factory (MAH / Hazardous / Non-hazardous) :
- (vii) No. of workers employed (regular, contractual and casual). :
- (viii) Details of product of the factory :

I / We have read and understood all provisions of the scheme. I / We undertake to comply fully with the provisions of the scheme. I / We declare that the information furnished above are true to the best of my / our knowledge and belief.

Place:

Date:

Signature of Occupier
(Name in Block Letter)

AFFIDAVIT

(To be filled by the Owner / Occupier / Manager on a Non judicial Stamp Paper of Rs.20/-)

I/We _____ Son/Daughter of Shri _____
 _____ Resident of _____
 and Occupier of M/s _____ do hereby solemnly affirm
 as under :

1. That, I/We have applied and given consent to be enrolled our factory by the name of M/s. _____ situated at (Complete address of the factory) _____ under Self Certification Scheme as per the Resolution No. _____ / Dated _____ of Labour & ESI Department, Government of Odisha.
2. That, I/We have gone through the scheme and have fully understood the contents of the scheme and undertake to abide by the same.
3. That, I/We are complying and will continue to comply with all provisions of Factories Act, 1948.
4. That, I/We will intimate the Director, Factories & Boilers in advance in the event of any addition or alteration in plant, process, equipment and machinery / manpower or installed power / change in ownership and obtain prior approval from the competent authority
5. That I / we will be liable for penal action prescribed under provisions of Factories Act, 1948 for violation of provisions in the statutes and for submitting false declaration.

Deponent

Place

Date

VERIFICATION

I / We the above named deponent declare on oath that the statement made above and the information furnished in my application are true to the best of my / our knowledge and belief.

Deponent

FORM-III

Return under Self Certification Scheme.

Assessment Year

1.	Name & Designation of the Applicant	
2.	Name & address of the Factory	
3.	Licence No. issued by DF&B(O) [the manpower & installed power as per licence also to be mentioned]	
4.	Name & present address of the Occupier	
5.	Name & present address the Factory Manager	
6.	Details of raw materials (List to be submitted)	
7.	Details of finished products	
8.	Maximum quantity of hazardous chemicals/ substances, stored/ used/ generated	
9.	Nature of Factory (MAH / Hazardous / Non-hazardous)	
10.	Whether involves any dangerous operation under Sec.87 of Factories Act, 1948. If yes the detail of operation.	
11.	Total No. of workers employed during the year (regular, contractor & casual workers to be submitted in separate sheet)	
12.	Actual installed power in KW	
13.	Whether plans of all buildings/ structures have been approved. If so, mention the No. & date of last approval of building plans of the factory. If not, state the portions which have not been approved.	
14.	Total no. of latrines and urinals	
15.	Total no. of washing place along with their locations for female & male worker separately.	
16.	Total no. of fire extinguishers provided with locations	
17.	Total no. of fire hydrant landing valves with location	
18.	Total no. of first-aid boxes, and Total no. of trained first aiders (list with names to be attached)	
19.	Total no. of Safety Officers engaged. (Their names, qualification and modality of functioning to be attached)	
20.	Total no. of Welfare Officers (if applicable) (Their names, qualification and modality of functioning to be attached)	

21.	Whether Ambulance room is provided or not and the appliances are kept as per statute .	
22.	Whether ambulance van is provided or not.	
23.	Whether rest room is provided or not.	
24.	Whether canteen is provided or not with basic amenities as per statute.	
25.	Whether notice of period of work is exhibited or not and if yes, their location.	
26.	No. of personal protective equipments like shoes, helmet, aprons, face shields etc. issued to workers as per their work site.	
27.	State, whether health check up for workers has been carried out or not as per statute. Give year-wise no. of workers medically examined.	
28.	State whether safety permit system is adopted or not.	
29.	Total no. of safety committee meetings convened during the last calendar year.	
30.	Whether up-to-date On-site emergency plan is approved/ accepted by the competent authority or not. if yes, mention the no. of mock drills conducted so far. If not its present status.	
31.	Whether safety audit is undertaken or not if yes, copy of the Internal and External Safety Audit Report to be submitted.	
32.	Whether register of adult workers is maintained or not	
33.	Whether register of leave with wages is maintained or not	
34.	Whether leave books are issued to each regular, Contractual and casual workers or not	
35.	Whether over time register is maintained or not	
36.	Whether overtime wages are paid as per Factories Act or not.	
37.	Whether overtime slips are issued to all the regular, casual and contractual workers or not	
38.	Whether register of accidents and dangerous occurrences are maintained or not	
39.	Whether all the reportable accidents are investigated by the management and preventive measures taken including near miss accidents.	
40.	Whether register of compensatory holidays maintained or not	
41.	Whether periodical fire Mock drills are conducted and recorded or not. If yes no of drills conducted.	
42.	Whether cautionary notices where ever required are displayed or not at prime locations	
43.	Whether written statement of general policy with respect to health and safety of workers is prepared and followed. If yes, details to be submitted.	

44.	The present status of detection of occupational disease	
45.	No. of in house Training programme conducted during the last calendar year.	
46.	Whether National Safety Day Observed by the management.	
47.	Total manpower deployed : from the state / outside the state.	

I/We do hereby declare that the information given above are true and correct.

Place:

Date :

Signature of the Occupier
with address and official seal