



# TAMIL NADU GOVERNMENT GAZETTE

PUBLISHED BY AUTHORITY

No. 27]

CHENNAI, WEDNESDAY, JULY 5, 2017  
Aani 21, Hevilambi, Thiruvalluvar Aandu – 2048

## Part III—Section 1(a)

General Statutory Rules, Notifications, Orders, Regulations, etc.,  
issued by Secretariat Departments.

### NOTIFICATIONS BY GOVERNMENT

#### CONTENTS

*Pages.*

#### LABOUR AND EMPLOYMENT DEPARTMENT

Amendments to the Tamil Nadu Motor Transport Workers Rules .. .. 116-120

**NOTIFICATIONS BY GOVERNMENT**

LABOUR AND EMPLOYMENT DEPARTMENT

**Amendments to the Tamil Nadu Motor Transport Workers Rules.**

[G.O.Ms.No.117, Labour and Employment (H1) 12th June 2017, வைகாசி 29, ஹேவிளம்பி, திருவள்ளூர் ஆண்டு-2048.]

No. SRO A-33/2017.—In exercise of the powers conferred by sub-sections (1) and (2) of Section 40 of the Motor Transport Workers Act, 1961 (Central Act 27 of 1961), the Governor of Tamil Nadu hereby makes the following amendments to the Tamil Nadu Motor Transport Workers Rules, 1965, the draft of the same have been previously published as required by the proviso to sub-section (1) of Section 40 of said Act.

2. This Notification shall come into force with effect on and from the date of its publication in the *Tamil Nadu Government Gazette*.

AMENDMENTS.

In the said Rules,-

- (1) in rule 43, for the expression "an annual return in duplicate", the expression "a combined annual return in Form No. XIX" shall be substituted;
- (2) for FORM No. XIX, the following Form shall be substituted, namely:-

**"FORM NO.XIX**

**(see rule 43)**

**Combined Annual Return for the year ending the 31st December 20**

1. Name of the Motor Transport Undertaking:
2. Full Postal Address with Fax No. and E-mail of the,-
  - (i) Motor Transport Undertaking
  - (ii) Registered Office/Head Office
  - (iii) Units/Branches
3. Nature of business/industry/work/ establishment/work carried-on/ service rendered:
4. Registration No:
5. Validity of the Certificate of Registration:
6. Name and address of the Employer with Mobile No. and E-mail:
7. Name and address of the Manager / Authorised Person with Mobile No. and E-mail:
8. Average Number of employees employed daily:-
  - (a) Adults:
  - (b) Adolescent:

Total:
9. Normal hours worked per day:
10. Rest Interval given:

11. Weekly Holiday:
12. Number of employees exempted from section 19:
13. Number of days worked during the year:
14. Total Amount of salary / wages paid including Over time wages and allowances:
15. Number of employees who received compensatory holiday in the;
  - (i) same month
  - (ii) following month
  - (iii) third month
16. Number of employees whose employment is ceased / suspended:-
  - (i) Number of employees discharged / dismissed / terminated / resigned / retired / expired during the year:
  - (ii) Amount of compensation paid:
  - (iii) Number of employees suspended during the year:
  - (iv) Amount of subsistence allowance paid:
17. Wages:-
  - (i) Total wages paid including deductions,-
    - (a) Basic wage:
    - (b) Dearness allowance:
    - (c) Overtime wage:
    - (d) Non-profit sharing bonus:
    - (e) Other allowances in cash:
    - (f) Arrears of pay in respect of previous year paid during the year:
  - (ii) Number of persons whose wages does not exceed Rs.18000/-\* per month (\* subject to change as and when the Government of India Notifies)
    - Men:
    - Women:
    - Adolescent:
  - (iii) Particulars of Deductions made from wages:-
 

| Deductions as         | Number of Employees involved | Total Amount of Deductions Made |
|-----------------------|------------------------------|---------------------------------|
| (a) Fines             |                              |                                 |
| (b) Damages/Loss      |                              |                                 |
| (c) Breach of Contact |                              |                                 |
| (d) Others            |                              |                                 |
| Total                 |                              |                                 |

(iv) Wage Period:

(v) Total wages paid in cash:

(vi) Total cash value of the wages paid In kind:

| (vii) Disbursement from Fines | Purpose | Amount |
|-------------------------------|---------|--------|
|-------------------------------|---------|--------|

(a)

(b)

(c)

(viii) Balance of fine in hand at the end of the year:

18. Leave:-

(i) Number of employees eligible for earned leave:

(ii) Number of employees availed / granted earned leave:

(iii) Number of employees paid wages / salary in lieu of earned leave :

19. Welfare Measures provided (If "yes" state briefly the standards provided):-

(i) Canteen:

(ii) Rest Rooms:

(iii) Medical Facilities:-

(a) Number of Dispensaries:

(b) Number of Doctors:

(c) Number of Nurses:

(iv) Uniform:

(v) First-aid box:

20. Maternity Benefits:

| (i) Benefits for | Number of Employees received the Benefits | Total amount paid |
|------------------|---|-------------------|
|------------------|---|-------------------|

(a) Miscarriage :

(b) Confinement :

(c) Illness :

(d) Medical Bonus :

(e) Total :

(ii) Number of women who gave notice under section 6 of the Maternity Benefit Act, 1961:

(iii) Number of women who were granted permission to absent on receipt of notice of confinement:

(iv) Cases in which payment was made to persons other than the woman concerned:

Number :

Amount Paid

- |   |                   |
|---|-------------------|
| (v) Cases in which payment was made on the order of the Appellate Authority or Inspector:   | Number :          |
|   | Amount Paid :     |
| (vi) Claims for maternity benefit rejected :  | Number :          |
|   | Amount not paid : |
| (vii) Claims for medical bonus rejected :   | Number :          |
|   | Amount not Paid : |
| (viii) Cases in which leave for miscarriage was applied for but was rejected :  | Number :          |
|   | Amount not Paid   |
| (ix) Cases in which additional leave for illness under Section 10 was applied for but was rejected:   | Number :          |
|   | Amount not Paid : |
| (x) Women deprived of maternity benefit and or medical bonus under proviso to sub-section (2) of Section 12 of the Maternity Benefit Act, 1961 :                      | Number :          |
|   | Amount not Paid : |
| (xi) Number of cases where prenatal confinement and post-natal care was provided by the management free of charge under Section 8 of the Maternity Benefit Act, 1961; |                   |

21. Details of remittances of Fines collected towards Tamil Nadu Labour Welfare Fund:-

- (i) Demand Draft No. and Date :
- (ii) Bank :
- (iii) Amount :

22. Bonus:-

- (i) Number of employees benefited by bonus payments:
- (ii) Percentage of Bonus declared:
- (iii) Total amount of Bonus paid:
- (iv) Date of Payment:

23. Conferment of Permanent Status:-

- (i) Number of non-Permanent workmen who have completed 480 days of continuous service:
- (ii) Number of workmen made permanent during the period:
- (iii) Number of workmen yet to be made permanent during the period:
- (iv) Reasons for delay:

24. Contract Labour:-

- (i) Name and addresses of the Contractors:
- (ii) Period of Contract:
- (iii) Nature of work / operations on which contract labour was employed:
- (iv) Maximum number of workers employed by each contractor :
- (v) Number of days worked :
- (vi) Number of mandays worked :

## 25. Inter-State Migrant Workmen:-

- (i) Name and addresses of the Contractors in Home State:
- (ii) Name of the Principal Employer in Host State (Tamil Nadu) :
- (iii) Period of Contract:
- (iv) Nature of work / operations on which migrant labour was employed:
- (v) Maximum number of migrant workmen employed by each contractor:
- (vi) Number of days worked:
- (vii) Number of mandays worked:
- (viii) Amount of displacement allowance paid:
- (ix) Amount of outward and return journey allowance paid:
- (x) Amount of wages for outward and return journeys paid:

Certified that the informations furnished above are, to the best of my knowledge and belief, correct.

Date:

Signature of the Employer.”

Place:

P. AMUDHA,  
*Secretary to Government.*