

GOVT. OF NCT OF DELHI  
OFFICE OF THE LABOUR COMMISSIONER  
LABOUR DEPARTMENT,  
5-SHAM NATH MARG, DELHI-110054

No.F.5(404)/2006/LC/Acctts./

Dated:

Sub:- Action Plan to be followed in view of the Centralization of Accounts of Labour Department from district offices to (HQ).

In compliance to the office order No.F.1/31/620/Estt./09/5356 dated 26.02.2014 regarding Centralization of Administration and Accounts of Labour Department from district offices to (HQ), it is requested that necessary action be taken on the following issues in the first instance so that the salary of the staff could be disbursed in time:-

1. Issuance of LPC's of all the staff posted in districts alongwith the ECS proforma (enclosed) and copy of their PAN Card.
2. Issuance of a certificate that no arrears/claims in respect of the officers/officials are pending in the districts.

If the above two documents are not received in stipulated time, the responsibility of delayed payment of salary shall lie with JLC/DLC/HOO of the districts.

Encl: As Above.

(Manoj Kumar V.M.)  
Accounts Officer

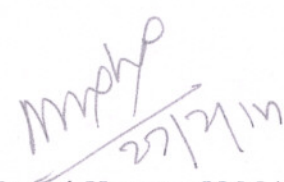
The JLC/DLC/HOO of all the nine districts ..... of Labour Department.

U.O.No.F.5(404)/2006/LC/Acctts./ 5373

Dated: 27/02/14

Copy to:-

1. JLC (Admn.), Labour Department, 5-Sham Nath Marg, Delhi-54.
2. PA to Secy-cum-Commissioner (Labour).
- ✓ 3. System Analyst to upload the same on the website of Labour Department.

  
(Manoj Kumar V.M.)  
Accounts Officer

LABOUR DEPARTMENT, GOVT. OF NCT OF DELHI  
5-SHAM NATH MARG, DELHI-110054

FORM NO.E.5

ELECTRONIC CLEARING SERVICE (CREDIT CLEARING)  
MODLE MANDATE FORM  
ECS FORM FOR STAFF FOR MAKING PAYMENTS

01. NAME OF THE OFFICER :

02. DESIGNATION :

03. ADDRESS(COMPLETE ADDRESS :  
WITH TELEPHONE NO.

04. PARTICULARS OF BANK ACCOUNT :

A. BANK NAME :

B. BRANCH NAME :

C. ADDRESS :

D. TELEPHONE NO. :

E. 09-DIGIT CODE NO. OF THE :  
BANK & BRANCH APPEARING  
ON THE M.I.C.R. CHEQUE ISSUED  
BY THE BANK(M.I.C.R. CODE.

F. ACCOUNT TYPE (S.B.ACCOUNT/ :  
CURRENT ACCOUNT OR CASH  
CREDIT) WITH CODE

G. ACCOUNT NO.(AS APPEARING :  
ON THE CHEQUE BOOK)

H. I.F.F.C. CODE NO. :

NOTE: - Please attach a blank cancelled  
Cheque or Photocopy of a cheque  
or front page of your Saving Bank  
Passbook, having the above details issued  
by your Bank for veification of the above.  
Particulars.

05. DATE OF EFFECT :

I, hereby declare that the particulars given above are correct and complete.

Signature.....

Name

Designation

Dated:

Signature of DDO,  
Labour Depatment(HQ),  
Govt. of NCT of Delhi,  
5-Sham Nath Marg,  
Delhi-110054

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
OFFICE OF THE LABOUR COMMISSIONER  
5, SHAM NATH MARG, DELHI-110054

First Hand information furnished to D.D.O at the time of joining Labour Department

- (1.) Name (in Capital Letters) : \_\_\_\_\_
- (2.) Designation (Complete) : \_\_\_\_\_
- (3.) Father's Name : \_\_\_\_\_
- (4.) Spouse Name : \_\_\_\_\_
- (5.) Whether Spouse is working : Yes/No
- (6.) If yes, Name and address of the Office/Department  
where working : \_\_\_\_\_
- (7.) Whether Unique I.D. Number has been allotted: Yes/No
- (8.) If yes, Unique I.D. Number : \_\_\_\_\_
- (9.) D.D.O/Department through which applied for Unique I.D.  
Number : \_\_\_\_\_
- (10.) Group of Post, presently held : \_\_\_\_\_
- (11.) Cadre to which belong : \_\_\_\_\_
- (12.) Date of joining Labour Department: \_\_\_\_\_
- (13.) Date of initial appointment in Govt. Service: \_\_\_\_\_
- (14.) Post held at initial appointment : \_\_\_\_\_
- (15.) Date of Birth : \_\_\_\_\_
- (16.) Scale of pay presently held : \_\_\_\_\_
- (17.) Date of increment : \_\_\_\_\_
- (18.) Income Tax PAN Number : \_\_\_\_\_  
(Attach photocopy)
- (19.) Income Tax Ward/Circle No. : \_\_\_\_\_
- (20.) G.P.F. Account Number : \_\_\_\_\_
- (21.) Whether member of Delhi Health Scheme : \_\_\_\_\_

P.T.O.



From pre page:

(22.) Whether Govt. Residential Accommodation  
Allotted : Yes/No

(i.) If Govt. Residential is allotted, its Address: \_\_\_\_\_

(ii.) Name of the Govt. to which belong  
(Centre/State) : \_\_\_\_\_

(iii.) Date of Allotment : \_\_\_\_\_

(iv.) Category /Type of Accommodation : \_\_\_\_\_

(v.) Water Charges to be recovered from Salary: \_\_\_\_\_

(vi.) License Fee to be recovered from Salary: \_\_\_\_\_

(23.) Particulars of Bank Account :

(i.) Bank Name : \_\_\_\_\_

(ii.) Branch Name : \_\_\_\_\_

(iii.) Branch Address : \_\_\_\_\_

(iv.) Bank's Telephone No. : \_\_\_\_\_

(v.) 09 - Digit Code No. of the Bank & Branch  
appearing on the M.I.C.R. Cheque issued by the  
Bank : \_\_\_\_\_

(vi.) Account Type (S.B.Account/Current Account  
or Cash Credit) with code 10/11/13 : \_\_\_\_\_

(vii.) Account No. (As appearing on the Cheque  
Book) : \_\_\_\_\_

(24.) (i.) Previous D.D.O's Name & Address : \_\_\_\_\_

(ii.) Previous D.D.O's Telephone No. : \_\_\_\_\_

Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Dated: \_\_\_\_\_

Branch where posted in Labour Deptt.: \_\_\_\_\_

Tel. No. (Office): \_\_\_\_\_

Tel. No. (Res): \_\_\_\_\_

Mobile Number: \_\_\_\_\_

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
OFFICE OF THE LABOUR COMMISSIONER  
5, SHAM NATH MARG, DELHI-110054

INFORMATION RELATING TO SPOUSE

- (1.) Name of the Officer/Official  
(in capital letters) : \_\_\_\_\_
- (2.) Designation (as per file) : \_\_\_\_\_
- (3.) Present Place/ Office of Posting : \_\_\_\_\_
- (4.) Date of Birth : \_\_\_\_\_
- (5.) Father's Name : \_\_\_\_\_
- (6.) Whether residing in Govt.  
Accommodation or in Pvt. House: \_\_\_\_\_
- (7.) Residential Address : \_\_\_\_\_
- (8.) Present (i.) Basic Pay : Rs. \_\_\_\_\_  
(ii.) Date from which  
Drawing : \_\_\_\_\_
- (9.) House Rent Allowance being  
Drawn : Rs. \_\_\_\_\_
- (10.) Whether availing facilities :  
(i.) Medical : \_\_\_\_\_  
(i.e. Member of DHS)  
(ii.) LTC : \_\_\_\_\_  
(iii.) T.F. Reimbursement/  
Edn. Allowance : \_\_\_\_\_
- (11.) Name & Address with Tel. No.  
Of the Previous DDO of the  
Officer/ Official : \_\_\_\_\_
- (12.) Name of the Spouse : \_\_\_\_\_
- (13.) Whether Spouse is working : Yes / No
- (14.) If yes, name & address of the : \_\_\_\_\_  
Department where working  
With telephone number : \_\_\_\_\_

P.T.O.

(15.) Whether spouse is allotted

~~Whether spouse is allotted~~

Yes / No

(16.) If yes, address of the  
Accommodation :

\_\_\_\_\_  
\_\_\_\_\_

(17.) Present Basic Pay of the spouse :  
With scale of pay, if any

Rs. \_\_\_\_\_

(18.) House Rent Allowance being

Drawn by the spouse

Rs. \_\_\_\_\_

(19.) Whether spouse is availing facilities  
From the officer's / official's Deptt.

(i.) Medical :

\_\_\_\_\_

(ii.) LTC :

\_\_\_\_\_

(iii.) T.F. Reimbursement/  
Edn. Allowance :

\_\_\_\_\_

(20.) Name & Address with Tel. No.  
Of the DDO of the Spouse :

\_\_\_\_\_  
\_\_\_\_\_

Signature of the Govt. Servant : \_\_\_\_\_

Name : \_\_\_\_\_

Designation : \_\_\_\_\_

Tel. No. : (Off.) : \_\_\_\_\_

(Res.) : \_\_\_\_\_

Mobile No. : \_\_\_\_\_



**GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
OFFICE OF THE LABOUR COMMISSIONER  
5, SHAM NATH MARG, DELHI-110054**

Information relating to savings for the purpose of rebate in Income Tax

Current Financial Year: From: \_\_\_\_\_ To: \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Income Tax PAN Number \_\_\_\_\_

Savings made or to be made during the  
Current Financial year (Except GPF,  
UTG/CIS, HBA, Recovery of Principal  
Considered on the basis of PBR)

S.No.	Item/Description	Name of the Bank/Company where Invested	Payment made Quarterly/Half Yearly/Yearly	Due Date of Payment	Total Savings of the Current Financial Year (Amount in Rs.)	Remarks
1.	L.I.C.					
2.	P.L.I.					
3.	Tax Saving Bonds					
4.	N.S.C.					
5.	Recovery of Principal Amount of HBA (Other than Salaries)					
6.	Recovery of Interest on HBA (other than salaries)					
7.	Tuition Fee (Details of class and fees paid per child may be given)					
8.	Insurance/Pension Fund					
9.	Rent paid *					
10.	Any other item, which can be considered for rebate by I.D.O. as per rule 1. 2. 3. 4. 5. Etc.					

\*P.T.O.

P.T.O.

Maximum Savings which will be made during the current financial year including ~~own~~ ~~house~~ savings and from salary will be Rs. \_\_\_\_\_

(in words \_\_\_\_\_).

Note: (I) All documentary proof duly attested by me will be submitted at an earliest but not later than by coming December and January of the current financial year, failing which, Income Tax as due may be deducted from my Salary Income and I will be responsible for giving incorrect information.

(II) In case of payment/recovery of interest on HBA either from salary or direct, necessary income from house property/loss from house property shall be intimated otherwise the same may not be considered.

Dated:

Signature :

Name :

Designation :

Address :

Tel. No. :

Attention: (Payment of Rent every month by employees shall be verified through rent receipt as per rule).

\* Details of rented accommodation:

(i) Address of rented residential accommodation :

(i.) Date from which occupied :

(i.i) Name & Address of owner with  
Tel. No. :