CHAIL OVERFOL OTATE INCUIDANCE CORPORATION																	
	EMPLOYEES' STATE INSURANCE CORPORATION																
FORM 15																	
ACCIDENT BOOK																	
(Regulation 66)																	
Name & Address of Employer			M/S A2Z INFRASERVICES LTD. O-116 FIRST FLOOR SHOPPING MALL ARJUN MARG DLF PH-1 GUI ESIC Code no.											69000469740001001			
Name 8	Address of P	rincipal Employer	M/S TCS LTD., PTI Building Sansad Marg New Delhi														
Sl. No.					(Age	Insurance No.	Shift, department and Occupation of the	Details of Injury					Name, occupation,	Signature and			
	Date of Notice	Time of Notice	Name and Address of Injured Person	Sex				Cause	Nature	Date	Time	Place	the injured person	address and signature or the thumb impression of the person(s)	designation of the person who makes		Remarks, if any
1		No any accident occure During the Month of Sep - 2021															
		Initials & Stamp of Contractor															

For A27 Infraservices Limited

Authorized Signatory