

**APPLICATION FOR ALLOTMENT OF SUB-CODE NUMBER
AT REGIONAL OFFICE / SUB-REGIONAL OFFICE**

1	Name & Address of the Factory / Establishment																			
2	Code No. Alloted to Head Office																			
3	Name & Address of Branch Office for which Sub-code applied																			
		Pincode :																		
	Telephone No. / Mobile No.	Fax No.					E-mail ID													
4	Name, Designation & Address of Office Incharge or Person responsible for compliance with the provisions of ESI Act, 1948																			
5	No. of Employees at the above Branch Office																			
6	Local Bank A/c No. & Banker's Address																			
7	Nature of Activity / Work being carried out at the above Branch Office																			
8	Date of opening of the above Branch Office																			
9	Address of the place where records are maintained & produced for Inspection																			
		Pincode :																		

I hereby declare that the information furnished above is true and correct to the best of my knowledge and belief and I am authorized Officer/Person to sign the paper relevant to compliance/registration under the ESI Act.

Signature of Authorized Signatory
with Name & Designation

Date :
Place :

List of Documents to be enclosed:

- C-11 copy issued from Regional Office / Sub-Regional Office
- List of employees with their designation, date of joining & monthly wages drawn