FORM No 5A



EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A)

Date: 26-Jun-2022

EMPLOYEES' PENSION SCHEME 1995 (Please refer Para)

EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME1976 (Please refer Para

(Ist RETURN OF OWNERSHIP AFTER ONLINE APPLICATION FOR CODE NUMBER)

[THIS FORM 5A HAS BEEN GENERATED BY ONLINE FILLING/ UPDATION OF FORM 5A THROUGH ECR LOGIN OF EMPLOYER. APPLICATION NUMBER IS 10000979631.]

Code Number: MRMRT2687602000

1. Name of Establishment

: HARVARD SCHOOL SOCIETY

2. Code Number of the Establishment under EPF Scheme

: MRMRT2687602000

3. Postal address of the Establishment and its branches [Please see Annexure

: Saint Momina School, Under Harvard School Society, Siyana Road

4. Industry or business in which engaged

Imliya, BULANDSHAHR, UTTAR PRADESH - 203001

: SCHOOL

5. Date of commencement of business

: 01/04/2019

6. Date of closure by previous

: N/A

7. Whether run by owner or lessee

: Run by Owner

8. Particulars of owners

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Ms. SHAMEEN SHAH	12/07/1975	CHAIRMAN	MUSTAGAFIR SHAH	N-847 ADIL LODGE CHANDPUR ROAD BULANDSHAHAR UTTAR PRADESH 203001	01/04/2019
2	Mr. TARIQ IQBAL	01/07/1958	MEMBER		91 IMILIA NAYA GAON BULANDSHAHAR UTTAR PRADESH 203001	01/04/2019

9. In case on lease, particulars of lessee

: N/A

S.No.		1 		and the control of th	
3.140.	Name	Date of Birth	Father's Name	Residential Address	Position
					Date

10. If registered under Factories Act, particulars of Manager or

: N/A

11. Particulars of persons mentioned above who are incharge and responsible for conduct of business of the

S. No.	Name	Date of	Status	Father's Name	Residential	Position
140.		Birth			Address	Date

Application Number: 10000979631 Code Number: MRMRT2687602000

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Saint Momina School Qulandshahr

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
	Ms. SHAMEEN SHAH	12/07/1975	CHAIRMAN		N-847 ADIL LODGE CHANDPUR ROAD BULANDSHAHAR UTTAR PRADESH 203001	01/04/2019

Date:

ANNEXURE - I

Details of Branches of the Establishment

ANNEXURE - II

List of Branches having Separate/ Sub Code Number

ANNEXURE - III

Details of Bank Account Number

No.	IFSC CODE	BANK NAME	BRANCH NAME	ACCOUNT NO	ACCOUNT TYPE	PRIMARY
1	ND UPCB00BUL	UTTAR PRADESH COOPERATIVE BANK	ZILA SAHKARI BANK LTD BULANDSHAHR	000425000000461	CURRENT	YES

Copy of cheque of the primary account number: 000425000000461

ZILA SAHKART BANK LTD. BULANDSHAHR
BRANCH NAME : 0004-COLLECTORATE
IFSC FOR RICS/NBFT : UPCB00BULND :
IFSC FOR DBTL/PFMS : ICIC00BULND :

ACCOUNT NUMBER : 000425000000461

CUSTOMER NAME : SAINT MOMINA SCHOOL IML

CUSTOMER NUMBER : 0010530 UCIC NUMBER : 1001454534

HUSBAND NAME
JOINT HOLDER
NOMINEE REGD
A/C OPENING DATE

A/C OPENING DATE : 31/05/2022 ACCOUNT STATUS/CATEGORY : Operative/General

PAN NUMBER : SJHPG7129P
MOBILE NUMBER : 9720878889

CUSTOMER ADDRESS : SAINT MOMINA SCHOOLVILL IMALIA SIYANA ROAD

Application Number: 10000979631

Code Number: MRMRT2687602000

Sqautam Principal

Saint Momtas School

Imaliya, Bulandshabr (U.P.)

214/7 21/2

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Chairman

Saint Momina School
Bulandshaha



Sub-Regional Office EMPLOYEES' STATE INSURANCE CORPORATION B-64, Sector-57, Noida-201301

C-11 Regd, with a.d.

20/6/2022

Dated:

To

M/s.HARVARD SCHOOL SOCIETY

Saint Momina School Under Harvard School Society Siyana Road Imliya,203001

Subject:- Implementation of the E.S.I. Act, 1948 and Registration of Employees of the Factories and Establishments under Section 1(5) of the Act, as amended.

Dear Sir(s),

- 1. It is informed that under section 1(3) of the esi. act, 1948 is applicable to all factories/establishments covered under the act within the area where your factory/establishment is situated
- 2. It is further informed that the appropriate government has extended the provisions of the act to other establishments under section 1(5) of the act in this area .
- Under section 2 a of the act such a factory/establishment is required to register itself under the act and chapter iv thereof casts a responsibility on the principal employer thereof to get his employees registered and pay contributions in respect of these employees covered under the act.
- 4. On the basis of the particulars in respect of your factory/establishment submitted by you, the report of the inspection conducted by the Social Security Officer, who inspected your establishment on -NA-, your establishment falls within the purview of Section 1(5) of the Act with effect from 01-06-2022. In case, however, subsequent facts reveal that your establishment was coverable from a date prior to the date mentioned above, you shall make yourself liable to comply with the provisions of the Act from such earlier date.
- 5. It is requested to take immediate steps for registration of your employees by submitting declaration forms online, payment of contribution, maintenance of records etc. from the date of coverage of your factory/establishment under the act. **You are also requested to submit employer's registration form (form 01) as required under the provisions of sec.2-a of the esi act , 1948 read with regulation 10-b of the esi(general), regulations, 1950.
- 6. For the sake of convenience your establishment has been allotted code No 67000962120001301 which may kindly be used in all communications sent to this office and on all forms at the place indicated for the purpose. The Branch Office of the Corporation situated at Sikandrabad Branch Office, HariSingh Mukhtiyar ki has been instructed to render necessary assistance to you in connection with registration of your employees. In case you find any difficulty or for any other purpose which may be necessary in connection with the Scheme you are requested to contact the Manager of the above Branch Office who will render necessary help in the matter.
- 7. A State wise list of ESI Dispensaries is available on our website www.esic.nic.in under the link Directories which can be downloaded. It is requested that publicity may be given about the Employees' State Insurance Dispensaries to enable your employees to choose their E.S.I. Dispensaries

Principal Principal

Saint Momina School Imaliya, Bilandshahe (U.P.) Chairman
Saint Momina School
Bulandshahe

- 8. The corporation officials would be pleased to give all necessary and possible guidance to you in discharging your duties and obligations under the est act, 1948 and I am confident of prompt and timely compliance under the provisions of the ESI act and regulations on your part.
- 9. All the Branches of State Bank of India are authorized to accept the ESI Contribution .
- 10. The brochures/leaflets containing benefits available under the scheme and obligation of the employer etc are available on our website www.esic.nic.in under the link Publications which may be downloaded for wide publicity for the smooth functioning of the scheme
- 11. Please indicate your code no. on all correspondences to avoid delay

Yours faithfully,

Encl. : As state above

Asstt./Dy. Director

Copy for information and necessary action to:

Name of the principal employer :

SHAMEEN SHAH

No. of employees

20

ENSURE - TO INSURE ALL ELIGIBLE WORKERS WITH ESI FOR TOTAL SOCIAL SECURITY

Principal
Seint Monine School

Imaliya, Bulandshahe (U.P.)

वामीन ग्राह

Chairman
Saint Momina School
Sulandshahr