

ANNUAL RETURN
(For the year ending 31st December 2018)

1	Name of the Establishment	Toolbox Animation Studio Pvt. Ltd		
2	Name of the Owner / Partner / Occupier / Director / Authorised Person	Shiva Prakash Gupta		
3	Name of the Manager	Anoop Chaphekar		
4	Total number of Workers Workers Contract Labour Casual Part Time Others(disabled employee) Total	MEN	WOMEN	
		23	5	
5	Whether the notice showing the details of persons engaged in confidential, managerial, supervisory capacity is sent?	YES		
6	Nature of Business	Animation Studio Production, Testing and designing Software		
7	Registration number Date of Validity of the Registration Certificate	1631000310273870 21-09-2019		
8	Number of shift Average number of persons engaged shift wise	1ST	2ND	3RD
9	Whether notice of shift is displayed and copy sent to the Facilitator?	YES	NO	N.A.
10	Number of women workers engaged during the year (if applicable) Number of women workers engaged in night shift	5 N.A.		
11	Whether consent letter from women workers working in night shift is obtained? (if applicable)	YES	NO	N.A.
12	Whether notice showing the weekly holiday of each worker is displayed?	YES	NO	
13	Whether committee under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (14 of 2013) is constituted? (if applicable) Name of the Chairman of the Committee	YES	NO	N.A. Manasi Raut
14	Whether police vartification of all the drivers and staff engaged in transportation of women workers is obtained? (if applicable)	YES	NO	N.A.
15	Is identity card issued to all workers?	YES	NO	
16	Is leave book maintained?	YES	NO	
17	Whether Committee for Health, Safety and Welfare is constituted? (if applicable)	YES	NO	N.A.
18	Whether all safety measures as per the directions of fire officer / department of local authority or Fire Bridged or any such authority are observed?	YES	NO	
19	Whether First aid box is maintained?	YES		
20	Whether the following welfare facilities are provided (wherever applicable)			
	a) sufficient number of latrines and urinals	YES	NO	
	b) Creche	YES	NO	N.A.
	c) Canteen	YES	NO	N.A.
21	Whether all the records and registers are maintained and required notices are displayed.	YES	NO	
22	Any application for compounding of an offence is made during the year? if yes, Date of application Date of disposal Amount of fees deposited	YES	NO	
23	Number of accident occurred in the establishment during the year Number of workers injured Amount of compensation paid	N.A.		
24	Is the name board displayed in Marathi.	YES	NO	

Declaration

I Mr. SHIVA PRAKASH GUPTA hereby solemnly affirm that all the information mentioned in the annual return are true and correct. I /we am/are aware that if any information submitted by me turns out to be false or not true or incorrect, I shall be liable for legal action under the concerned Law.

Date: PUNE
Place: 28-Feb-19


Signature of Employer.