

Form XVI

MUSTER ROLL

[See Rule 78(1)(a)(ii)]

Name and Address of Contractor:

ICON Facilitators Pvt.Ltd. C-28, 2Nd Floor, Community Center Janak Puri New Delhi 110058

Nature and Location of Work:

Integrated Facility Management

Name and Address of Principal Employer:

DLF FOUNDATION DELHI, MCD PARK, WARD NO-86,SOUTH ZONE, W BLOCK GREATER KAILASH NEW DELHI-110048

Name and Address of Establishment in/ under which Contract is Carried on:

DLF FOUNDATION DELHI

For the month of :-AUGUST'2023

Sl.No	Name of Employee	Father's/Husband's Name	Gender	Date/Units																												Total No. Of Days/Units	Remarks		
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28			29	30
1	SAROJ DEVI	HUBBA LAL	F	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	H	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	31	
2	PRAMOD KUMAR	OM PRAKASH	M	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	H	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	31	
3	KANCHAN KUMAR	BACCHU YADAV	M	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	H	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	31	
4	MONU 1	KALI CHARAN	M	P	P	OFF	P	P	P	P	P	OFF	P	P	P	H	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	31	
5	HARGOVIND	RAM GOPAL	M	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	H	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	31	
6	HARIOM	KALICHARAN	M	P	P	P	OFF	P	P	P	P	P	OFF	P	P	P	H	P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	31		
7	RANJAN KUMAR	YOGINDER SINGH	M	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	H	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	31	
8	ASHOK PRASAD	RAM ASHISH	M	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	H	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	31		
9	MONU	BIJENDER	M	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	H	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	31		

Signature of the Contractor

