

**Form XVI**

**MUSTER ROLL**

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

<b>Name and Address of Contractor:</b>	ICON Facilitators Limited. C-28, 2Nd Floor, Community Center Janak Puri New Delhi 110058
<b>Nature and Location of Work:</b>	Integrated Facility Management at New Delhi
<b>Name and Address of Principal Employer:</b>	NCR CORPORATION INDIA PVT LTD. DELHI 6TH FLOOR,UNIT NO.602B/1KONNECTUS TOWER , BHAUBHUTI MARG, NEAR MINTO BRIDGE, NEW DELHI 110001
<b>Name and Address of Establishment in/ under which Contract is Carried on:</b>	NCR CORPORATION INDIA PVT LTD. DELHI 6TH FLOOR,UNIT NO.602B/1KONNECTUS TOWER , BHAUBHUTI MARG, NEAR MINTO BRIDGE, NEW DELHI 110001

**For the month of : OCT-2024**

Sl.No	Name Of Employee	Father's/Husband's Name	Gender	Date/Units																												Total No. Of Days/Units Worked	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	RAJESH SHARMA	DINESH SHARMA	MALE	P	H	P	P	P	O	P	P	P	P	P	O	P	P	P	P	P	P	O	P	P	P	P	P	P	O	P	P	P	H	31	

**Signature of the Contractor**

