

**FORM NO. 7**  
**(Prescribed under Rule 17)**  
**Record of Lime washing, painting, etc.**

<b>Name and number of the room and its location in the factory</b>	<b>Part of the room treated</b>	<b>Treatment whether lime washed, colour washed, painted, varnished, or oiled</b>	<b>Date of treatment</b>	<b>Remarks</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

Date :

Signature of Manager  
Name ( In Block Letters )  
Address and Tel. No. :