

FORM XVIII

(See Rule 25)

Memorandum of Agreement

It is hereby submitted that on the day of.....20..... personal injury was caused to..... residing at..... by accident arising out of and in the course of his employment in..... The said injury has resulted in permanent disablement to the said employees of the following nature, namely:

The said employee's monthly wages are estimated at Rs.....

The employees is over the age of 15 years/ will reach the age of 15 years on..... The said employees has, prior to the date of this agreement's received the following payments namely:

Rs. on..... Rs..... on.....

Rs. on..... Rs..... on.....

Rs. on..... Rs..... on.....

It is further submitted that... the employer of the said employees, has agreed to pay, and the said workman has agreed to accept the sum of Rs in full settlement of all and every claim under the Social Security Code, 2020, in respect of the disablement stated above and all disablement now manifest. It is, therefore, requested that this memorandum be duly recorded.

Dated 20.....

Signature of employer.....

Seal.....

Witness.....

Signature of employees.....

Witness.....

(Note:-- An application to register an agreement can be presented under the signature of one party, provided that the other party has agreed to the terms. But both signature should be appended, whenever possible)

(Receipt to be filled in when the money has actually been paid) In accordance with the above agreement, I have this day received that sum of Rs.....

Employees

Seal

Dated 20.....

This money has been paid and this receipt signed in my presence.

..... Witness

Note.— This form may be varied to suit special cases, e.g., injury by occupational disease agreement when employee is under legal disability, etc.