

Form 39
[see Rule 173(2)]

NOTICE OF CLOSURE

Name of factory and full address	Nature of manufacturing process	Date of closure	Reasons of closure	Nature of closure whether entire or partial; if partial, the shift, section or department closed	Number of workers on the muster roll of factory at the time of closure	Number of workers affected by the closure
1	2	3	4	5	6	7

Signature of
Manager
Date: -