

**FORM - XXIV**  
**(See Rule 241 (2) (b))**  
**SERVICE CERTIFICATE**

Name and permanent address of the establishment.

Nature and location of work.

Name and address/location where the building or other construction work carried on/to be carried on.

Nature and location of work : .....

Name and address of the workman .....

Age or Date of Birth : .....

Identification Marks : .....

Father's/Husband's name : .....

Sl. No.	Total period for which employment		Nature of work done	Rate of wages (with particulars of unit in case of piece work)	If the building worker was a beneficiary his registration No. date and the name of the Board.
1	2	3	4	5	6
Reasons/grounds on which the employment terminated					Remarks
7					8

Signature