

पावर ग्रिड कारपोरेशन ऑफ इंडिया लिमिटेड

दक्षिण क्षेत्र पारेषण प्रणाली-1

POWER GRID CORPORATION OF INDIA LTD  
SOUTHERN REGION TRANSMISSION SYSTEM-I

घटना स्थल पर लिये गए सुरक्षा सत्रों की साप्ताहिक रिपोर्ट

WEEKLY REPORTING OF SAFETY SESSIONS TAKEN AT SITE

- 1) पैकेज/Package..... RAICHOR - SHOLAPUR 765 KV SL LINE  
स्थल संख्या/ Location No. .... 7/7 A+D DER  
जगह/ Place..... VENKATAPUR RAICHOR DIST  
2) मुख्य ठेकेदार का नाम/Name of the main Contractor..... NATIONAL CONTRACTORS CO. LTD  
3) उप ठेकेदार का नाम/ Name of the Sub-Contractor..... SAKTHI AMERICAN CONST.  
4) प्रशिक्षण सत्र की तिथि/ Date of Training Session..... 09.08.2012  
5) सत्र को ले रहे पावर ग्रिड पदधारी का नाम व पदनाम/  
Name & designation of Power Grid Official taking session..... SHRI K. GOVARDHAN - MANAGER  
6) घटना स्थल पर गतिविधि में प्रगति/ Activity in progress at Site..... FOUNDATION WORKS  
7) घटना स्थल पर कार्यकारी कर्मचारियों की संख्या/ No of Employees working at site  
क) विभागीय कार्यपालक..... पर्यवेक्षक..... श्रमिक.....  
a) Departmental Executives..... Supervisors..... Workmen.....  
ख) ठेकेदार के कार्यपालक..... पर्यवेक्षक..... श्रमिक.....  
b) Contractor's Executives..... 5..... Supervisors..... 1..... Workmen..... 18  
8) सत्र में उपस्थित कर्मचारियों की संख्या/No. of employees attended in the session. 23  
क) विभागीय कार्यपालक..... पर्यवेक्षक..... श्रमिक.....  
a) Departmental Executives..... 1..... Supervisors..... 2..... Workmen..... 2  
ख) ठेकेदार के कार्यपालक..... पर्यवेक्षक..... श्रमिक.....  
b) Contractor's Executives..... 5..... Supervisors..... 1..... Workmen..... 18  
9) सत्र में लगा समय/ Time covered in the session..... 1.00 HR  
10) सत्र में सम्मिलित विषयों के स्वरूप/ Nature of Topics covered in the session..... SAFETY  
DURING FOUNDATION WORKS  
DURING TRANSPORTING ETC.

11) क्या पदधारी ने व्यक्तिगत संरक्षी उपस्कर और उपकरण व संयंत्र की जाँच की? हाँ/ना  
Has the Official also checked the personal protective equipment and T&P. Yes/No/

12) यदि हाँ, तो विवरण संलग्न किया जाए/ If, Yes details thereof to be enclosed.....

स्थल/Place:

दिनांक/Date:

(पदधारी का हस्ताक्षर/Signature of Official)

नाम/Name:..... K. GOVARDHAN

पदनाम/Designation:..... Manager (Safety)

(लाइन प्रभारी का हस्ताक्षर/Signature of Line In-charge)

नाम/Name.....

क्षेत्रीय मुख्य सुरक्षा प्रबंधक/क्षेत्रीय-1, सिकंदराबाद को सूचना के लिये अद्योषित

Forwarded to Chief Regional Safety Manager, SRTS-I Secunderabad for kind information please.

सुरक्षा एक अच्छी कारोबारी भावना है. SAFETY IS A GOOD BUSINESS SENSE

Safety Me.  
NCC



घटना स्थल पर व्यक्तिगत संरक्षी उपस्कर और उपकरण व संयंत्र की जाँच

Checking of personal protection equipment and T & P at site of Work.

दिनांक/Date: 09.08.2012

स्थल/Location: T/T A+O DFR.

पैकेज/Package: P. 260 Test I RAICHOOR - SHOLAPUR. T/S KW.

ठेकेदार का नाम (जिनके वस्तु जाँच किये गए)..... NATIONAL CONTRACTING CO. LTD  
Contractor's Name (whose items checked)

घटनास्थल पर कार्यकारी व्यक्तियों की संख्या/ No. Of Contractor's persons working at site: 23

कार्यपालक/ Executives..... पर्यवेक्षक/ Supervisors..... श्रमिक/ Workmen.....

क्रम.सं. Sl.No.	वस्तुओं का विवरण Details of Items	निर्माता का नाम Manufacturer's Name	पहचान चिन्ह Identification mark	स्थिति Status
1	HELMETS (18 Nos)	CHAMPION	Aeme	Good.
2	CUMBOOTS (7 Nos)	KARAM.	IS 2925	.
3	GLOVES (5 Nos)	KARAM		

(पावरग्रिड के प्रतिनिधि का हस्ताक्षर)  
(Signature of POWERGRID Rep)

नाम/Name: ...  
पदनाम/Designation: ...

(ठेकेदार के प्रतिनिधि का हस्ताक्षर)  
(Signature of Contractor's Rep.)

नाम/Name: ...  
पदनाम/Designation: ...

स्थल/Place: ...

दिनांक/Date: ...

सुरक्षा एक अच्छी कारोबारी भावना है SAFETY IS A GOOD BUSINESS SENSE



**POWER GRID CORPORATION OF INDIA LTD.  
CORPORATE OPERATION SERVICES**

**SAFETY CHECK LIST PRIOR TO COMMENCEMENT OF WORK**

Name of the Project : P-260. TW I  
 Name of Transmission Line. : RAJNOR - SHOLAPUR, 765KV. 5/6 LINE  
 Name of the POWERGRID site In-charge : SHRI. M. VENKATESWARALU. CM.  
 Name of Project Manager of Construction Agency: P. BASKAR. SR. P.M.

Sl. No.	Description	Observation	Remarks
1	Contractor Safety Policy. (Copy)	Available / Not available ✓	SENT TO H.O. SIGNATURE. SHALL BE SUBMITTED. SHOWN
2	Labour licence. (Copy)	Available / ✓ Not available	COPY ENCLOSED
3	Explosive licence if required. (Copy)	Available / Not available	N/A
4	Comprehensive Insurance Policy. (Copy) ( Workmen Compensation, General Liability, Automobile insurance)	Available ✓ Not available	COPY ENCLOSED.
5a	<b>Deployment of Manpower Plan:</b> Copy of the organization structure of contractor to be finalized during preaward.		
5b	<b>Manpower deployment plan activitywise</b>		
6.	Deployment of Full time Safety officer of contractor at site : Name:- F. B. FARAAZ. Designation:- SAFETY ENGR.		CERTIFICATE COPIES ENCLOSED.
7.	<b>Availability of Communication facility:</b> a) Public Address system. b) Walky Talkie. c) Red and Green Flags.	= Nos. = Nos. = Nos.	MOBILE PHONES. 20 NOS. ON. CWA. AVAILABLE.
8.	<b><u>Personal Protective Equipment (PPE).</u></b>	Total quantity required	Quantity available Plan of PPE deployment for balance
(i)	Safety Helmets ( IS marked, having Chin strap and nape strap).	38	38
(ii)	Safety Belts (IS:3521/EN 361) with shoulder, Waist & thigh straps, automatic locking of hook, shock absorber in life line and tool kit bag. Serial No. / Batch number printed on the belts and supported with test certificate).	4	0 WILL BE ARRANGED SHORTLY.



	Mobile Fall Arrestors for TL construction (Set)	N/A		FOR ERECTION & STRINGING TIME WOULD BE PROVED. Balance would be arranged shortly.
(iv)	Safety Shoes suitable for TL construction.			
(v)	Gum Boots.	16	12	
(vi)	Hand Gloves. (Leather, Cotton & Electrical).	16	5	
(vii)	Any other PPEs	-	-	

9. Comments from contractor in short, if any:

Briefing by Safety Manager of PCCIL both for Supervisory and Technical staff was very much useful for the km members. We would keep in mind all his instructions while executing the works.

10. Observations of POWERGRID in short, if any:

The agency has been observing all safety norms and procedures while executing the work.

Contractor Representative			POWERGRID		
Name	Designation	Signature	Name	Designation	Signature
P. BASKAR	Jr. Pm.	<i>[Signature]</i>	K. GOVARDHAN	Manager (Supply)	<i>[Signature]</i>

Copy : ED( Region)  
GM CMG / CC, Gurgaon.  
GM (OS) / CC, Gurgaon



**POWER GRID CORPORATION OF INDIA LIMITED**  
**CORPORATE OPERATION SERVICES**

**Safety Check List During Foundation Work**

Region: ..... TL Const. office: RAJENDUR Date of Inspection: 09.08.12  
 Name of the TL: BILCILUR SUDHAKAR K.S. K. Ste. div. P. 2. G. Sec I  
 Loc. No.: 117.45.07R Classification of Foundation and Type of tower: A.H.D.  
 Main Contractor: NATIONAL CONTRACTORS LTD Sub contractor: SAKSHI MURUGAN

Sl.No	Description	Observations	Remark
1	Check whether Supervisor / Gang leader had issued instructions to workers before start of work on that day.	YES	BY NCC Safety Officer
2	a) All workers are using PPEs at site i.e. Safety Helmets, Rubber Gum Boots, Hand Gloves. b) POWERGRID Officials are using PPEs at site.	Safety helmet - No. in use / total worker = 18/18 Rubber Gum Boot - No. in use / total worker = 7/18 Hand Gloves - No. in use / total worker = 5/18 Yes / No.	
3	Distance of Dumped excavated soil of all four sides from the edge of the pit.	3 MTS	
4	Slope of cutting edge of all four sides.	DRY HARD SOIL	
5	a) De watering arrangement, if required. b) If yes, Distance of disposal of water.	N/D	
6	Installation of Shoring & Shuttering, if required.	N/D	
7	Adequate warning & Barricading of the pit for protection have been made.	YES	
8	The Blaster is valid license holder. Yes / No. Adequate arrangement made to inform public by caution marking (Red flag) / Public Notice) and signal man posted.	N/A	
9	Strong ladder provided in the pit.	YES	3 1/2 MTS
10	Jacks for supporting the template is placed at safe distance.	YES	1 1/2 MTS
11	Distance of construction materials, Concrete Mixer / Compressor placed from edge of pit.	YES	1.5 MT
12	Whether arrangements for electrical loose joints and barricading of electrical panels have been made.	N/A	
13	Whether all Safety aspects taken care of for concreting.	YES	
14	First Aid box with required items are available at site and (Name & No.) of First Aid trained persons	YES	FARAAZ
15	Action taken for violation for safety norms, if any.	N/A	Bullet instructions given to PCCIL Safety Manager
16	Any other points specific to location:		to All crew members

CONSTRUCTION AGENCY OFFICIALS			POWERGRID OFFICIALS		
Name	Designation	Signature	Name	Designation	Signature
P. BASWAR	SR. PM	<i>[Signature]</i>	M. RAMANA	Senior Technician	<i>[Signature]</i>
D. KRISHNA	SR. SUPER	<i>[Signature]</i>	K. GOVARDHAN	Manager	<i>[Signature]</i>
FARAAZ	SAFETY Eng.	<i>[Signature]</i>			

Copy : 1. Project Manager Const. Agency M/s ..... 2. GM of Const. Agency M/s .....  
 3. Site In-charge POWERGRID ..... 4. ED(Region)/ GM(Projects)POWERGRID .....

- Safety Check list for Pile / Well Foundation will be issued separately.





BY RPAD

Government of India  
Ministry of Labour and Employment  
Office of Regional Labour Commissioner (Central)  
BUDA Building, Mothi Circle,  
Bellary-583101.

No.46(38)/2012-RLC/BLY

Date: 24.05.2012.

To

M/s National Contracting Co., Ltd.,  
No.01-11-55/17,  
First Floor, Venkateshwara Colony,  
Lingu sugur Road,  
Raichur-584101  
Sir,

Sub: Contract Labour (Regulation & Abolition) Act, 1970 and Central Rules, 1971  
- Issue of Licence - Reg.

Ref: Your letter No. Nil dated

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1. The Licence bearing No.38/2012-RLC/BLY dated 24.05.2012 in respect of Foundation and Tower Erection and Transmission line etc., from Raichur to Sholapur
2. The licence is issued without any prejudice to any legal action that his department initiate against you for commencing the work without obtaining valid licence.
3. The maximum number of contract workers to be engaged in the above contract work should not exceed 150 (One hundred and fifty ) on any day.
4. The contract labour should not be engaged in the prohibited categories of employment as per the Notification of the Govt. of India
5. Acknowledge the receipt and strictly adhere to the conditions of licence.
6. For renewal of licence, the application for renewal should be submitted one month in advance before the date of expiry of the licence.

Yours faithfully,

(Y.V.N.CHARI)

LICENSING OFFICER AND  
REGIONAL LABOUR COMMISSIONER (CENTRAL), BELLARY

Encl As above.

Copy together with copy of application for licence is forwarded to

1. The LEO(C), Bellary/Gulbarga,
- 2 The Chief Manager, Power Grid Corporation of India Ltd., No.1-4-1495, Ganga Parameshwari Layout, Raichur