

MONTHLY STATISTICAL RETURN (MSR-E)
PROCESSING OF YARN, FABRICS, RMG & MADE-UPS
PRESCRIBED UNDER COLLECTION OF STATISTICS ACT,2008

TO BE SUBMITTED BY UNITS UNDERTAKING ACTIVITIES UNDER NATIONAL INDUSTRIAL CLASSIFICATION CODE

1313: Finishing of textiles

1394: Manufacture of cordage, rope, twine and netting

INSTRUCTIONS:

1. ORIGINAL COPY TO BE SUBMITTED TO OFFICE OF THE TEXTILE COMMISSIONER, NISHTHA BHAWAN, NEW CGO BUILDING, 48 NEW MARINE LINES, MUMBAI-400020 **ON OR BEFORE 15TH DAY OF THE FOLLOWING MONTH.**
2. FIGURES SHOULD BE ROUNDED OFF AND NO DECIMAL OR FRACTION NEED TO BE GIVEN.

PART-00 UNIT DETAILS

| PAN Number | Month/Year for which information is submitted |
|------------|---|
| | |

| | |
|----------------------------|--|
| NAME OF THE UNIT | |
| ADDRESS | |
| NAME OF THE CONTACT PERSON | |
| MOBILE NUMBER | |

PART-01: DETAILS ON EMPLOYEES & WORKERS ENGAGED DURING THE MONTH

| WORKERS EMPLOYED | | | | | | MANAGERIAL/SUPERVISORY STAFF/OTHER STAFF | |
|------------------|-------|----------|-------|-------------|-------|--|-------|
| REGULAR | | CONTRACT | | DAILY WAGER | | Men | Women |
| Men | Women | Men | Women | Men | Women | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

PART-02: CONSUMPTION OF RAW MATERIAL*

| Process | Raw Material Consumed (Description) | Unit | Quantity Consumed |
|---------|--|------|-------------------|
| | | | |
| | | | |
| | | | |
| | | | |

*Details of chemicals consumed

PART-04: DETAILS OF CAPACITY UTILIZATION

| Average no of days worked during the month | Number of days not worked due to | | | | | Capacity Utilization (%) |
|--|----------------------------------|-------------|-----------------|-------------|-------------------------------|--------------------------|
| | Power Shortage | Absenteeism | Labour Shortage | Maintenance | Others (please specify -----) | |
| | | | | | | |

CERTIFICATION

CERTIFIED THAT THE ABOVE PARTICULARS HAVE BEEN CHECKED WITH THE RECORDS OF THE MILL AND THAT THEY ARE, IN SO FAR AS I CAN ASCERTAIN, ACCURATE AND COMPLETE

| DATE | PLACE | NAME & SIGNATURE OF THE AUTHORIZED SIGNATORY WITH SEAL |
|------|-------|--|
| | | |