On Vendor / Contractor letter head

Date: 00/00/0000

Manager HR & Admin

Zydus Takeda Healthcare Pvt Ltd.

C/4 MIDC Pawne, Thane Belapur Road,

Navi Mumbai, 400705

Dear Sir,

**Sub: Permission to allow our employees to work at your Factory between 00/00/0000 to 00/00/0000, Number of Employees : \_\_\_\_\_\_\_\_\_**

I) We have received your Purchase Order No Dt. 00/00/0000. In this connection we are furnishing following information along with attested xerox copies of the same.

OR

II) We have received your Purchase Order No Dt. 00/00/0000. This work we have sub contracted (to Name sub contractor and Add) under the information in writing to your Purchase Department. In this connection we are furnishing following information along with self attested xerox copies of all documents .

|  |  |
| --- | --- |
| Name of the Employer / Contractor / Vendor  |  |
| Employer / Contractor / Vendor PF Registration No |  |
| Employer / Contractor / Vendor ESIC Registration No |  |
| Employer / Contractor / Vendor BLWF Registration No |  |
| Employer / Contractor / Vendor Professional Tax Registration No |  |

List of Employees with Photo Identity Card

|  |  |  |  |
| --- | --- | --- | --- |
| Sr. No | Full Name of Employee  | ESIC number  | PF Number  |
| 1 |  |  |  |
| 2 |  |  |  |
| So on  |  |  |  |

You are requested to do the needful,

Thank You

For XYX Contractor

 X Seal

Authorised Signatory

Encl : Attested xerox copiesi

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