

ADVERTISEMENT

Director, Industrial Safety & Health, 5th Floor, Commerce Centre, Tardeo, Mumbai-400 034, is inviting application on behalf of State Government from Private Doctors / Medical Practitioners for authorizing them as Certifying Surgeon under Sec. 10(2) of Factories Act, 1948.

Criteria :

- 1) Applicant shall possess MBBS degree from a statutory University and he shall be registered with Maharashtra Medical Council.
- 2) In addition shall possess DPH or DIH post-graduate diploma from the recognized university or three months Govt. recognized course that is AFIH.
- 3) Also applicant should have minimum 10 years of experience in medical work in Factories or 5 years of experience as a Certifying Surgeon under section 10(2) of Factories Act, 1948.
- 4) Shall have Clinic / Hospital & Laboratory facilities of own.

In the Clinic / Hospital for carrying out the investigation / test following equipments should be available :-

(i) Stethoscope, (ii) BP instrument, (iii) Vision chart, (iv) weighing machine, (v) ENT checking kit, (vi) Lung function test instrument (Spiro meter), (vii) Audiometric machine, (viii) ECG machine, (ix) Ultrasonography machine, (x) Stress test machine.

Further qualified staff to operate above equipments shall be appointed.

- 5) Clinic / Hospital should be in the same district for which applicant wants to apply.
- 6) Applicant should not be a Occupier of a factory or is or becomes directly or indirectly interested therein or in any process or business carried on therein or in any patent or machinery connected therewith or otherwise in the employee of the factory.
- 7) Tenure for Authorised Certifying Surgeon will be for 2 years.
- 8) Applicant should apply to the Director, Industrial Safety & Health, Mumbai in the prescribed proforma (available with the Directorate). Applicant should submit with the application form a fees of Rupees Ten thousand only by Demand Draft / Pay Order drawn in favour of "Director, Industrial Safety & Health, Mumbai".

- 9) Candidates who have applied before, should apply again as per this advertisement in the prescribed proforma, along with necessary fees. The amount of fees deposited earlier will be refunded.
- 10) For further details visit www.intranet.maharashtra.gov.in
- 11) Application shall reach to the Directorate within 15 days of the advertisement to

**“Director, Industrial Safety & Health,
Commerce Centre, 5th Floor, Tardeo,
Mumbai-400 034.”**

NOTE : Any further information is available on the address mentioned above and Telephone Nos. 022 - 2352 2230 / 31 / 32 / 33.

Application form for Authorized Certifying Surgeon-

To,

The Director,
Industrial Safety & Health,
5th floor, Commerce Center,
Tardeo, Mumbai.
Pin-400034.

Self signed
passport size,
latest
photograph
of the
candidate

Sub: Application for Authorized Certifying Surgeon

Respected sir,

With respect to above mentioned subject, I am submitting following information.

1. Name of Applicant :
2. Name of District Applied for Authorized Certifying Surgeon :
3. Address of Clinic/Hospital (phone/mobile) :
4. Educational Qualification :
5. Experience regarding health checkup: of Industrial Workers
6. Experience regarding working as Authorized Certifying Surgeon, if any :
7. Facilities & equipments available at the Clinic/Hospital for Industrial workers health checkup. :
8. Whether working as a Factory Medical: Officer at present

Date:
Place

Signature
Applicant's Name

Attach following documents-

- 1) Affidavit on stamp paper (Rs 20/-)
- 2) Attested documents regarding educational qualifications.
- 3) Demand draft of Rs. 10,000/- (Rupees Ten Thousand only) as application fee in favour of "Director, Industrial Safety & Health , Mumbai" payable at Mumbai.
- 4) Monthly Report in format regarding work done as Authorized Certifying Surgeon in past
- 5) Experience certificates regarding health checkup of Industrial workers

AFFIDAVIT

I,undersigned Dr._____,Age_____yrs,
Occupation- Medical. Address_____

giving following information in writing that ,

I am not occupier of any factory or is or becomes directly or indirectly interested therein, or in any process or business carried on therein, or in any patent or machinery connected therewith or not otherwise in the employment of the factory.

I am submitting this affidavit only for application for authorized certifying surgeon.

The above said information is true and correct as per my knowledge, and today signed for that,

Date:
Place:

Deponent

Witness