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THE HARYANA MATERNITY BENEFIT RULES, 1967

Notification No. GSR-15/CA/53/61/S.28/67 Dated the 11th April, 1967

In exercise of the powers conferred by Section 28 of the Maternity Benefit Act 1961 (Central Act 53 of 1961) the Governor of Haryana, hereby makes the following rules namely:-

1. Short Title and commencement- These rules may be called the Haryana Maternity Benefit Rules, 1967.

2. Definition - In these rules, unless the context otherwise requires.
   (a) “Act” means the Maternity Benefit Act, 1961 (Central Act, 53 of 1961);
   (b) “Competent authority” in relation to an establishment as defined by clause (e) as a factory as defined by clause (6) of section 3 of the Act, shall be the Chief Inspector of Factories, Haryana or any person authorised by the State Government by a Notification in this behalf;
   (c) “Form” means a form appended to these rules;
   (d) “Muster roll” means a muster roll maintained under rule 3;
   (e) “Registered Medical Practitioner” means a medical practitioner whose name has been enrolled in a register maintained under any law for the time being in force regulating the registration of practitioner of medicine;
   (f) “Section” means a section of the Act.

3. Muster roll - (1) The employer of every factory or plantation including an establishment belonging to Government in which women are employed shall prepare and maintain a muster roll in Form ‘A’ and shall enter therein particulars such as the daily attendance of all women workers in the establishment.
   (2) All entries in the muster roll shall be made in ink and maintained up to date and it shall always be available for inspection by the Inspector during working hours.
   (3) The employer may enter in the muster roll such other particulars as may be required by the Competent Authority for any other purpose of the Act.

4. Form of Notice Under Section 4 - The written notice referred to in section 6 shall be in Form ‘B’.

5. Proof - (1) The fact that a woman is pregnant or has delivered of a child or has undergone miscarriage or is suffering from illness arising out of pregnancy, delivery, premature birth of child or miscarriage shall be proved by the production of certificate to that effect in Form ‘C’ from:-
   (a) a Medical Officer of a regional hospital or of a dispensary set up by the State Government;
   (b) a registered Medical Practitioner.
   (2) The fact that a woman has been confined may also be proved by the production of certified extract from a birth register maintained under the
provisions of any law for the time being in force or a certificate signed by a qualified mid-wife.

(3) The fact that a woman has undergone miscarriage may also be proved by the production of a certificate signed by a qualified mid-wife.

(4) The fact of death of a woman or a child may be proved by the production of a certificate to that effect in Form “D” from any of the authorities referred to in sub-rule (1) or by the production of a certified extract from a death register maintained under the provisions of any law for the time being in force.

(5) For the purposes of sub-rules (2) and (3) the qualifications to be possessed by a mid-wife shall be determined by the State Government on the recommendations of the Competent Authority. The certificate from a qualified mid-wife shall be in Form ‘E’.

6. Payment of maternity and other benefit - (1) Payment of maternity benefit and of any other amount due under the Act, shall be made, in case of her death before receiving such maternity benefit or amount by the employer to the woman concerned, or, where the employer is liable for maternity benefit under the second provision to sub-section (3) of section 5 to the person nominated by the woman in her notice in Form “B” and in case there is no such nominee to her legal representative.

(2) In case of any doubt, the maternity benefit or other amount due to a woman under the Act, shall be paid by the employer to the recipient after necessary inquiries are made by the Competent Authority to ensure that the person to whom the payment is to be made, in his opinion, is entitled to receive it.

(3) Whenever the payment referred to in sub-rule (1) is made, a receipt shall be obtained by the employer in Form ‘F’ from the person to whom the payment is made. In cases falling under sub-rule (2) a receipt shall be given by the recipient of the benefit in Form ‘F’ to the employer after receiving the payment in the presence of Competent Authority or his nominee who shall countersign it.

(4) The medical bonus shall be paid along with the second instalment of the maternity benefit.

(5) The payment under section 7 shall be made within two months of the date of death of the woman entitled to receive the payment.

(6) The wages due under section 9 shall be paid immediately after production of the certificate.

(7) The wages due under section 10 shall be paid within a week of the beginning of the period of leave referred to in that section on the production of a certificate in Form ‘C’ from the medical officer of a regional hospital or of a dispensary set up by the State Government or from a registered Medical Practitioner.

7. Break for nursing child -(1) Each of two breaks mentioned in section 11 shall be of 20 minutes duration.
Provided that in case the crèche or place where children are left by women while on duty is not in the vicinity of the place of work a period up to 15 minutes more may be allowed for the purpose of journey to and from crèche or the place.

8. **Restriction and conditions governing the working of the Competent authority and Inspectors under the Act** - (1) The Competent Authority shall be responsible for the due administration of these rules.

(2) Every Inspector shall discharge his duties within the area assigned to him by the State Government and shall act under the supervision and control of the Competent Authority.

(3) No Inspector shall physically examine or question any woman worker in respect of her pregnancy. In case of any doubt in this respect he may immediately refer the case to a female registered medical practitioner for examination and report, any fees payable for such an examination shall be paid by the employer of the woman worker.

(4) The Inspector shall issue written instruction for ensuring the compliance of all or any of the provisions contained in the Act and for the production of the records in his office within 24 hours of the conduct of the inspection in case where the records are not made available at the time of inspection for the reasons beyond the control of the management.

9. **Gross misconduct** - The following facts shall constitute gross misconduct for the purposes of section 12, namely:

(a) Wilful destruction of goods or property of the employer of value exceeding Rs. 100/-. However, this shall not include the cost of defective production due to lack of skill.

(b) The nefarious immoral activities established to the satisfaction of the competent Authority.

(c) Serious crime such as theft, fraud for dishonesty resulting in an ultimately conviction in a court of law.

(d) The acts of gross misconduct mentioned in sub-rule(1) will, however, deprive a woman worker of the benefit only once and not for ever.

10. **Appeal under section 12** - (1) An appeal under clause (b) of sub-section (2) of Section 12 shall be preferred to the competent Authority in **Form ‘G’**.

(2) The appeal may be made in writing and either handed over personally or sent under a registered cover to the Competent Authority.

(3) When an appeal is received, the Competent Authority shall furnish a copy of memorandum of appeal to the employer, call for his reply there to and ask him to produce documents connected with issue of appeal by a fixed date. On considering the facts presented to him and ascertained by him the Competent Authority shall give his decision. In case the employer fails to submit his reply or
produce the required documents within the specified period, the Competent Authority may give his decision *ex-parte*.

11. **Complaint under Section 17** - (1) A complaint under sub-section (1) of section 17 shall be made in writing in Form 'H' or Form 'I' as the case may be, to the Inspector.

   (2) When a complaint referred to in section 7 is received by an Inspector he shall examine the relevant records maintained by the employer in this behalf, examine any person employed in the establishment and take down necessary statement for the purpose of the enquiry and if he is satisfied that the maternity benefit or the amount has been improperly withheld, he shall direct the employer to make the payment to the woman or to the person claiming the payment under section 7, as the case may be immediately or within a specified period.

12. **Appeal under section 17** - (1) An appeal against the decision of the Inspector under sub-section (2) of Section 17 shall lie to the Competent Authority.

   (2) The aggrieved person shall prefer an appeal in writing to the Competent Authority in Form 'J' and file other supporting documents.

   (3) When an appeal is received, the Competent Authority shall call upon the said Inspector to produce before him, before a fixed date, a copy of his decision and other documents concerning the decision. The Competent Authority shall, if necessary, also record the statements of the aggrieved person and of the Inspector and seek clarification, if any, is required.

   (4) Taking into account the documents, the evidence produced before him and the facts presented to him or ascertained by him, the Competent Authority shall give his decision.

13. **Supply of forms** - The employer shall supply to every woman employed by him at her request free of cost copies of Forms 'B', 'C', 'D', 'E', 'F', 'G', 'H' and I.

14. **Preservation of records** - Records kept under the provisions of the Act and these rules, shall be preserved for a period of two years from the date of their preparation.

15. **Abstract** - The abstract of the provision of the Act and these rules required to be exhibited under section 19, shall be in Form 'O' and shall be exhibited in such manner as the Competent Authority may require.

16. **Annual Return** - (1) The employer of every establishment shall on or before the 21st day of January in each year submit to the Competent Authority a return in each of the Forms 'K', 'L', 'M', 'N' giving information as to the particulars specified in respect of the preceding year.

   (2) If the employer of an establishment to which the Act applies sells, abandons or discontinues the working of the establishment, he shall, within one month of the date of sale or abandonment or four months of the date of discontinuance as the case may be, submit to the Competent Authority a further return in each of the
said forms in respect of the period between the end of the preceding year and the
date of sale, abandonment or discontinuance.

FORM ‘A’
(See rule 3)

Muster Roll

Name of the Establishment: _______________________

1. Serial Number : _______________________

2. Name of woman and her father’s
   (or if married husband’s name) : _______________________

3. Date of appointment : _______________________

4. Nature of work : _______________________

5. Dates with month and year in which
   she is employed, laid off and not employed : _______________________

<table>
<thead>
<tr>
<th>Month</th>
<th>No. of days employee</th>
<th>No. of days laid off</th>
<th>No. of days not employed</th>
<th>REMARKS</th>
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6. Date on which the woman gives notice under section 6:

7. Date of discharge or dismissal, if any:

8. Date of production of Proof of Pregnancy under section 6:

9. Date of birth of child:

10. Date of production of proof of delivery or miscarriage or death:

11. Date of production of proof of illness referred to in section 10:

12. Date with the amount of maternity benefit paid in advance of expected delivery:

13. Date with the amount of subsequent payment of maternity benefit:

14. Date with the amount of medical bonus, if paid under section 8:

15. Date with the amount of wages paid on account of leave under section 9:

16. Date with amount of wages paid on account of leave under section 10 and period of leave granted:

17. Name of the person nominated by the woman under section 6:

18. If the woman dies, the date of her death, the name of the person to whom maternity benefit and/or other amount was paid, the amount thereof and the date of payment:

19. If the woman dies and the child survives the name of the person to whom the amount of maternity benefit was paid on behalf of the child and the period for which it was paid:

20. Signature of the employer of the establishment authenticating the entries in the muster roll:

21. Remarks column for the use of Inspector:
FORM ‘B’
(See rule 4)
Notice under section 6 of the Maternity Benefit Act, 1961

(Name of the establishment) ; ______________

1. __________________________ (Name of the woman) wife/daughter of employed as _________ at ______________ (Name of the establishment) hereby give notice that I expect to be confined within six weeks next following from the date of this notice/ have given birth to a child __________ (date) and shall be absent from work from _______ (date).

I shall not work in any branch of establishment during the period, for which I receive maternity benefit.

2. For the purpose of section 7, I hereby nominate __________ (here enter name and address of the nominee) to receive maternity benefit and/or any other amount due to me under the Act, in case of my death.

3. That the maternity benefit due to me may be paid to me/my __________ Shri Shrimati ______________ whom I authorise to collect the same on my behalf.

Signature of an Attestor in case the woman is not able to sign and affixes thumb-impression.

Signature or thumb impression of Woman

Date ______________

FORM ‘C’
[See rule 5(1)]
Certificate to be issued by Medical Officer/Medical Practitioner regarding pregnancy.

This is to certify that I examined __________ wife/daughter of ______________ a woman employed in __________ (Name of the establishment) on __________ (date) and found/cannot discover that she is pregnant and is expected to be delivered of a child within (months/days) from the above-mentioned date/has undergone miscarriage/has been delivered of a child or __________ (date) or is suffering from ______________ (date) from illness arising out of pregnancy/delivery/premature birth of a child or a miscarriage.

Date ______________

Signature, Qualification,
Designation of Medical Officer
Medical Practitioner.
FORM ‘D’
[See rule 5(4)]
Certificate to be Issued by Medical Officer/Medical Practitioner regarding death of Child/Woman,

This is to certify that Smt. ___________________________ wife/daughter of ___________________________ employed in ___________________________ (name of the establishment) expired on __________ before/during/after confinement, the child died on __________ survives her.

Date __________

Signature, Qualifications and Designation of Medical Officer/ Medical Practitioner

FORM ‘E’
[(See rule 5(5)]
Certificate to be issued by qualified Midwife regarding delivery of Child/Miscarriage.

This is to certify that I examined __________ wife/daughter of __________ a woman employed in __________ (name of the establishment) and found that she has been delivered of a child/has undergone miscarriage on __________ (date).

Dated __________

Signature of qualified midwife

FORM ‘F’
(See rule 6)
Receipt of Maternity Benefit In Form - F

To ______________________________________ (name of establishment)

I, ____________________ the undersigned, a woman employee/the nominee of __________ woman employed/legal representative of __________ woman employee deceased in __________ (name of establishment) at __________ in __________ district, received maternity benefit and/or other amount due under the Maternity Benefit Act, 1961, from the employer of the establishment referred to above, as detailed below:-

Rs. __________, being the first instalment of maternity benefit paid on __________.

Rs. __________, being the second instalment of maternity benefit after delivery paid on __________.

Rs. __________, being the medical bonus under section 8 of the Act in __________.

Rs. __________, being the wages for the leave period from __________ to __________ mentioned under section 8 or 10.
*My/Her confinement/miscarriage took place on ______ or I/she fell ill because of pregnancy, delivery, premature birth of a child or miscarriage on __________. In consequence I ___________ her nominee legal representative have received the aforesaid amount prescribed in section 5, 8, 9, and 10 of the Maternity Benefit Act, 1961.

Signature or thumb/impression

*Woman employee or her nominee or legal representative.

Signature of an attester in case the woman is not able to sign and affix thumb-impression.

Date

Signature of the Competent Authority.

* Strike out unnecessary Portion

**FORM‘G’**

[See rule 101]

**Appeal regarding non-receipt of maternity benefit.**

To

The Competent Authority

appointed under the Maternity Benefit Act.

________________________ (Address)

Sir,

I __________ the undersigned, woman employee of __________(name of the establishment and full address) having wrongly deprived by the employer of maternity benefit or medical bonus or both amounting to Rs.............. (strike out unnecessary portion) for the reasons attached hereto prefer this appeal under sub-section (2) of section 12 and request that the said employer be ordered to pay the above-mentioned amount to me. A copy of the order of the employer in this behalf is enclosed.

Date ________________________

Signature or thumb-impression

of the woman

Signature of an Attestor, in case the woman is not able to affix thumb-impression
FORM ‘H’
[See rule 11]
Complaint to be made to the Inspector.

To

The Inspector,
(appointed under the Maternity Benefit Act, 1961)

Sir,

I, __________ (name of the woman employed in __________) (name and full address of the establishment) having fulfilled the conditions laid down in the Maternity Benefit Act, 1961, and the Rules thereunder am entitled to Rs. __________ being maternity benefit* and/or Rs. __________ being the medical bonus and/or Rs. __________ being wages for leave due under section 9 or 10 but the same has been improperly withheld by the employer. He may, therefore, be directed to pay the aforesaid amount to me.

Date __________ Signature or thumb-impression of the woman

Full Address________________________

FORM ‘I’
[See rule 11]
Complaint to be made to the Inspector by nominee/Legal representation.

To,

The Inspector,
(appointed under the Maternity Benefit Act, 1961).

I, __________ (name), a person nominated under section 6 by or legal representative of __________ (name of woman/employed in __________) (name and full address of establishment) have to complain that the said woman having fulfilled the conditions laid down in the Maternity Benefit Act, 1961, and the Rules thereunder is entitled to Rs. __________ being maternity benefit and/or Rs. __________ being the medical bonus and/or Rs. __________ being wages for leave due under sections 9 and 10 but the same has been improperly withheld by the employer. He may, therefore, be directed to pay the aforesaid amount to me.

Signature or thumb-impression of the nominee/legal representative.
FORM 'J'
[See rule 12]
Appeal Under Section 2 of Section 17 of the Act.

To

The Competent Authority,
(appointed under the Maternity Benefit Act, 1961)

Sir,

Shri.........................inspector,having directed under sub-section (2) of section 17 to pay the maternity benefit or other amount, being.......... (nature of amount) to which............... (name of woman) is said to be entitled. I prefer this appeal under sub-section (2) of section 17. In view of the facts mentioned in the memorandum attached hereto and other documents filed-herewith, it is submitted that the woman is not entitled to the maternity benefit or the said amount and hence the decision of the Inspector in their behalf, copy of which is enclosed, may be set aside.

Date __________

Signature of aggrieved person.
Full address.........................

FORM 'K'
[See rule 16]
Annual return for the year ending on the 31st December, 19......

1. Name of the establishment; : __________________________

2. Situation of the establishment; : __________________________

   Mouza : __________________________
   District : __________________________
   State : __________________________
   Nearest Railway Station’,

3. Date of opening of establishment; : __________________________

4. Date of closing, if closed; : __________________________

5. Postal address of establishment; : __________________________

6. Name of the employer;
   Postal address of employer; : __________________________

7. Name of the managing agent, if any Postal
   address of managing agent; : __________________________

8. Name of agent or representative of employer
   Postal address of representative of employer; : __________________________
9. Name of Manager
   Postal address of Manager:

10. (a) Name of medical officer attached to the establishment:
     (b) Qualification of medical officer attached to the establishment:
     (c) Is he resident at the establishment?
     (d) If a part-time employee, how often does he pay visits to the establishment?

11. (a) Is there any hospital at the establishment?
     (b) If so, how many beds are provided for women employees?
     (c) Is there a lady doctor?
     (d) If so, what are her qualification?
     (e) Is there a qualified midwife?
     (f) Has any creche been provided?

Date............. Signature of employer

FORM ‘I’
[See rule 16]
Employment, dismissal, payment of bonus, etc., of women for the year ending 31st December, 19.....

1. Establishment:

2. Aggregate number of women permanently or temporarily employed during the year:

3. Number of women who worked for a period of not less than one hundred and sixty in the twelve months:

4. Number of women who gave notice under section 6:

5. Number of women who were granted permission to absent on receipt of notice of confinement:
6. Number of claims for maternity benefit paid: __________________

7. Number of claims for maternity benefit rejected: __________________

8. Number of cases where pre-natal, confinement and post-natal care was provided by the management free of charge (section 8): __________________

9. Number of claims for medical bonus paid (Section 8): __________________

10. Number of claims for medical bonus rejected: __________________

11. Number of cases in which leave for miscarriage was granted: __________________

12. Number of cases in which leave for miscarriage was applied for but was rejected: __________________

13. Number of cases in which additional leave for illness under section 10 was granted: __________________

14. Number of cases in which additional leave for illness under section 10 was applied but rejected: __________________

15. Number of women who died:
   (a) before delivery: __________________
   (b) after delivery: __________________

16. Number of cases in which payment was made to persons other than the woman concerned: __________________

17. Number of women discharged or dismissed while working: __________________

18. Number of women deprived of maternity benefit and/ or medical bonus under proviso to sub-section(2) of section 12: __________________

19. Number of cases in which payment was made on the order of the Competent Authority or Inspector: __________________

20. Remarks: __________________

N.B.- Full particulars of each case reason for the action taken under serial Nos. 7, 10, 14, 17 and 18 should be given in the Appendix below:

Date................. Signature of employer
FORM ‘M’
[See rule 16]
Details of payment made during the year ending 31st December, 19.....

Name of person to whom paid

1. Date of payment
2. Woman employee
3. Nominee of the woman
4. Legal representative of woman
5. Amount for the period preceding date of expected delivery
6. Amount for the subsequent periods
7. Under section 8 of the Act
8. Under section 9 of the Act
9. Under section 10 of the Act
10. Number of women workers who absconded after receiving the first instalment of maternity benefit
11. Cases where claims were contested in a court of law
12. Result of such cases
13. Remarks

Date .............  Signature of the employer.

FORM ‘N’
[See rule 16]
Prosecution during the year ending 31st December 19.....

<table>
<thead>
<tr>
<th>Place of employment of the woman employee</th>
<th>Number of cases instituted</th>
<th>Number of cases which resulted in conviction</th>
<th>Remarks</th>
</tr>
</thead>
</table>

Date.................  Signature of the employer
FORM ‘O’

(See rule 15)

(Abstract of the Maternity Benefit Act, 1961, and the rules made thereunder)

1. No employer shall knowingly employ a woman during the six weeks immediately following the day her delivery or; mismanage and no woman shall work in any establishment during the said period.

2. No pregnant woman shall, on a request being made by her in this behalf be required by her employer to do during the period of one month immediately preceding the period of six weeks before the date of her expected delivery and also for any period during this period of six weeks for which she does not avail of leave of absence, any work which is of an arduous nature or which involves long hours of standing or which in any way is likely to interfere with her pregnancy or the normal development of the foetus or is likely to cause her miscarriage or otherwise to adversely affect her health.

3. (1) subject to the provisions of the Act, every woman who has actually worked in an establishment of the employer from whom she claim maternity benefit for a period not less than one hundred and sixty days, including the days during which she was laid off shall one entitled to and her employer shall be liable for the payment of maternity benefit at the rate of her average daily wages, or one rupee a day, whichever is higher, for the period of her actual absence not exceeding six weeks immediately preceding and including the day of her delivery and for the six weeks immediately following that day:

Provided that qualifying period of hundred and sixty days afore-said shall not apply to a woman who has immigrated into the State of Punjab and was pregnant at the time of immigration:

Provided further that where a woman dies during the period for which maternity benefit is payable to her, the benefit shall be payable only for the days upto and including the days of her death. However, where the woman having been delivered of a child dies during her delivery or following the date of her delivery leaving behind in either case the child, the employer shall be liable for the payment of maternity benefit for the entire period of six weeks immediately following the day of her delivery but if the child also dies during the said period then, for the days upto and including the day of the death of the child.

(2) The amount of maternity benefit for the period preceding the date of her expected delivery shall be paid in advance by the employer to the woman on production of a certificate in Form ‘B’ stating that she is pregnant and is expected to be delivered of a child within six weeks of the date of production of the certificate, and the amount due for the subsequent period shall be paid by the employer to the woman within forty-eight hours of the production of the certificate in Form ‘C’ or Form ‘E’ stating that she has been delivered of a child or production of a certified extract from a Birth Register maintained under the provisions of any law for the time being in force.

4. (1) Any woman employed in an establishment and entitled to maternity benefit under the provisions of this Act, may give notice in writing in Form ‘B’ to her employer stating that her maternity benefit and any other amount to which she may be entitled under this Act may be paid to her or to such person as she may
nominate in the notice and that she will not work in any establishment during the period for which she received maternity benefit.

(2) In the case of a woman who is pregnant, such notice shall state the date from which she will be absent from work not being a date earlier than six weeks from the date of her expected delivery.

(3) Any woman who has not given the notice when she was pregnant may give such notice as soon as possible after the delivery.

(4) On receipt of the notice, the employer shall permit such woman to absent herself from the establishment until the expiry of six weeks, after the day of her delivery.

5. (1) Every woman entitled to maternity benefit under the Act shall also be entitled to receive from her employer a medical bonus of twenty-five rupees, if no prenatal confinement and post-natal care is provided for by the employer free of charge. The medical bonus shall be paid along with the second instalment of the maternity benefit.

(2) In case of miscarriage, a woman shall on production of a certificate in Form ‘C’ or Form ‘B’ be entitled to leave with wages at the rate of maternity benefit for a period of six weeks immediately following the day of her miscarriage. The wages shall be paid within 48 hours of production of the certificate in Form ‘C’ or Form ‘B’.

(3) A woman suffering from illness arising out of pregnancy, delivery, premature birth of child or miscarriage shall on production of a certificate in Form ‘C’ be entitled in addition to the period of absence allowed to her on account of maternity or miscarriage, as the case may be, to leave with wages at the rate of maternity benefit for a maximum period of one month. The wages for the leave period shall be paid within 48 hours of the expiry of the period.

6. Every woman delivered of a child who returns to duty after such delivery shall in addition to the interval for rest allowed to her be allowed in the course of her daily work two breaks of 5 minutes duration for nursing the child until the child attains the age of fifteen months. An extra sufficient period, depending upon the distance to be covered shall be allowed for the purpose of the journey to and from the creche or the place where the children are left by women while on duty provided that such extra period shall not be less than 5 minutes and more than 15 minutes duration.

7. (1) When a woman absents herself from work in accordance with the provisions of the Act it shall be unlawful for her employer to discharge or dismiss her during or on account of such absence or to give notice of discharge or dismissal on such a day that the notice will expire during such absence, or to vary to her disadvantage any of the conditions of her service.

(2) (a) The discharge or dismissal of a woman at any time during pregnancy if the woman but for such discharge or dismissal would have been entitled to maternity benefit or medical bonus shall not have the effect of depriving her of the maternity benefit or medical bonus:

Provided that where the dismissal is for one or more of the following acts, the employer may by order in writing communicated to the woman, deprive her of the maternity benefit or medical bonus or both:

(i) Willful destruction of employer’s goods or property;

(ii) assaulting any superior or co-employee at the place of work;
(iii) criminal offence involving moral turpitude resulting in conviction in a court of law;
(iv) theft, fraud or dishonesty in connection with the employer’s business or property;
(v) Willful non-observance of safety measures or rules on the subject or willful
interference with safety devices or with fire-fighting equipment.

(b) Any woman deprived of maternity benefit or medical bonus or both, may within
sixty days from the date on which the order of such deprivation is communicated
to her, appeal in Form ‘C’ to the Competent Authority and the decision of the
Competent Authority on such appeal whether the woman should or should not be
deprived of maternity benefit or medical bonus or both shall be final.

8. If a woman works in any establishment after she has been permitted by her
employer to absent under the provisions of the Act, she shall forfeit her claim to
the maternity benefit of such period.

9. (1) Any woman claiming maternity benefit or any other amount to which she
is entitled under the Act and any person claiming that payment due has been
improperly withheld may make a complaint to the Inspector in writing in Form ‘H’
or ‘I’ as the case may be.

(2) The Inspector may of his own motion or on receipt of a complaint in Form ‘H’ or ‘I’
make an enquiry of cause an enquiry to be made and if satisfied that payment
has been wrongfully withheld, may direct the payment to be made in accordance
with his orders.

(3) Any person aggrieved by the decision of the Inspector may within thirty days from
the date on which such decision is communicated to such person, appeal to the
Competent Authority.

(4) The decision of the Competent Authority where an appeal has been preferred to
him or of the Inspector where no such appeal has been preferred shall be final.

10. (a) The employer shall supply to every woman employed by him at her request

(b) The failure to submit a notice, appeal or complaint in the prescribed form will not
affect the right of a woman entitled to receive maternity benefit or any other
amount due under the Act. Where a notice, appeal or complaint has been
received in a form other than the prescribed form the authority concerned shall
within fifteen days of the receipt of such notice, appeal or complaint require the
woman to submit the notice, appeal or complaint as the case may be in the
prescribed form.

11. (a) The employer of every establishment in which women are employed shall
prepare and maintain a muster roll in Form ‘A’ and shall enter therein particulars
of all women workers in the establishment.

(2) All entries in the muster roll shall be made in ink and maintained upto date and it
shall always be available for inspection; by the Inspector during the working
hours.

(b) The employer of every establishment shall on or before the 21st January in each
year submit to the Competent Authority a return in each of the form ‘K’, ‘L’, ‘M’
and ‘N’ giving information as to the particulars specified in respect of the
preceding year.