

FORM B

(To be submitted in triplicate)

[See Rule 4(i)]

Claim under CI.(b) of sub-section(1) of sec. 7 of the Equal Remuneration
Act, 1976 (25 of 1976)

To

The Authority appointed under sub-section (1) of Sec. 7.

.....(Address)

A.....Petitioner(s)

Full address

Versus

B.....Opposite Party

.....Full address

The petitioner(s) above named states/states as follows :

- (1) The petitioner(s) was /were /is/are employer from.....to.....as(Category)
in.....(name of the establishment) of Shri/Messrs.....(Name of the employer and
address).
- (2) The opposite party is the employer within the meaning of CI. (c) of Sec. 2 of the Equal
Remuneration Act, 1976(25 of 1976).
- (3) The petitioner(s) was/were/has/have not been paid wages at rates equal to those of
workers of the opposite sex for the same work of a similar nature for the period
from..... to.....
- (4) The petitioner(s) was/were/has/have been paid wages at the rate of.....
whereas workers of the opposite sex for the same work or work of a similar nature were
paid/ have been paid at the rate of.....during the said period.
- (5) The petitioner(s) estimates/estimate the value of relief sought by him/them at
Rs.....[Rupees.....(in words)].
- (6) The petitioner(s), therefore, pray/pray that the Authority may be pleased to decide
the claim set out above and pass such order or orders thereon as it may deem fit and
proper.
- (7) The petitioner(s),begs/beg leave to amend or add to or make alterations in the petition ,if
and when necessary, with the permission of the Authority.

The petitioner(s) does/do solemnly declare that the facts stated in this petition are true to
their behalf and information.

Signature(s) thumb-impressions(s)
of the Petitioner(s)

I have been duly authorized in writing by.....[here insert the name of worker(s)]
to appear and act on his/her/their behalf.

Signature of the legal practitioner/
official of a registered Trade
Union duly authorized.

Station.....

Date.....

Strike out this portion if inapplicable.