

**Certificate of unemployment due to retrenchment/closure of factory/permanent invalidity arising out of non-employment injury to the extent of 50% or more.**

Certified that Shri/Smt./Kumari \_\_\_\_\_ s/w/d of Sh. \_\_\_\_\_ employed with M/s. \_\_\_\_\_ has lost his/her employment w.e.f. \_\_\_\_\_ due to **the following reasons.**

1. **Permanent closure of the factory**
2. **Retrenchment**
3. **Permanent invalidity arising out of non-employment injury to the extent of 50% or more.**

Place \_\_\_\_\_

Signature \_\_\_\_\_

Dated: \_\_\_\_\_

Name \_\_\_\_\_

Seal & Stamp of the  
signing authority

**N.B. :** This certificate is to be issued by Inspector of Factories/ Assistant/Dy. Labour Commissioner/ Workmen Compensation Commissioner or any other authority specified in this regard.