



MINISTRY OF EMPLOYMENT, LABOUR AND SOCIAL SECURITY

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EMPLOYMENT ACT, 2023

APPLICATION FOR THE REGISTRATION OF A WORKPLACE

(Section 21)

(PARTICULARS TO BE SUBMITTED BY EMPLOYER OR INTENDING EMPLOYER OF A WORKPLACE)

1. Name of the Employer or intending Employer of the Workplace
.....
2. Address and location of the Workplace
.....
3. Official Email:.....
4. Workplace Website address.....
5. Phone number of the Workplace.....
6. Type of Workplace (e.g. private, government, Non-governmental, Multinational Enterprise etc.).....
.....
7. Nature of the work carried on, or proposed to be carried on, in the Workplace
.....
8. (a) Whether mechanical power is used or intended to be used and if so, it's nature
.....
.....
(b) Whether electrical power is used or intended to be used and if so, state total electrical power consumed in KW.
.....
9. Whether steam boilers, air or steam receivers etc. are used or intended to be used and, if so the following particulars in respect of each such boiler, air, steam receiver:-
 - (a) Type, description and distinctive number.....
.....
 - (b) Country and year of manufacture.....
 - (c) Date of the last thorough examination and name of person by whom the examination was made.....

.....
(d) Maximum permissible working pressure in pounds per square inch or kilogramme per centimeter square

.....
(If the space is not enough, the above information can be submitted on a separate sheet of paper)

10. (a) Total number of workers employed, or intended to be employed, in the Workplace.....

.....
(b) Where workers are employed or intended to be employed in shifts, the maximum number employed, or intended to be employed, at any time.....

(c) Total number of Non-citizens employed or intended to be employed in the Workplace.....

(d) **Total number of:**

(i) **Interns**.....

(ii) **Volunteers**.....

(iii) **Apprentices**.....

11. Date of occupation or intended date of occupation of the work place.....

12. Do you use or intend to use any of the following:-

(i) Air Compressors.....

(ii) **Liquid Petroleum Gas Cylinders**.....

(iii) Chain Blocks or lifting tackles.....

(iv) Cranes, Winches etc.....

(v) Hoists or lifts including car hoists.....

(vi) Other Electrical apparatus.....

(vii) Radioactive substances.....

(viii) **Others**.....

13. (a) Whether explosive or highly inflammable materials are used or stored.....

(b) **If used, type of explosive or inflammable materials**

14. Have the premises been previously used as a workplace? If so, please state name of previous Employer or Owner and registration certificate number (if known).....

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Signature & Stamp of Employer or Intending Employer

Returned completed Form to-

The Commissioner of Labour and Employment
Ministry of Employment, Labour and Social Security
New England Ville
Freetown