## FORM OF AGREEMENT BETWEEN THE EMPLOYER AND WORKMAN REGARDING COMPENSATION FOR INJURY CAUSED TO WORKMAN BY ACCIDENT

## MEMORANDUM OF AGREEMENT

It is hereby submitted that on the
The said injury has resulted in temporary disablement to the said workman whereby it is estimated that he will be prevented from earning more than of his previous/ any wage for a period
Dated
Signature of employer Witness
Signature of workman Witness
NoteAn application to register an agreement can be presented under the signature of one party, provided that the other party has agreed to the terms. But both signatures should be appended, whenever possible.
Receipt (to be filled in when the money has actually been paid).
In accordance with the above agreement, I have this day received the sum of Rs
Datedworkman
The money has been paid and this receipt signed in my presence.
witness
Note.—This form may be varied to suit special cases, e.g., injury by occupational disease

agreement when workman is under legal disability etc.