OFFICE MEMORANDUM

Subject: Guidelines for settlement of claims for compensation on accidents applicable to the Department of Science and Technology and all the Autonomous Institutions/Professional Bodies/Subordinate Offices /Boards under its control.

The undersigned is directed to send the above mentioned guidelines for necessary action and compliance with immediate effect.

The guidelines have the approval of the competent authority.

(Soumitra Basu)
Under Secretary to the Govt. of India

To,

1. JS, Administration
2. Head, AI Division
3. Head, SMP Division
4. Head, TDT Division
5. Deputy Secretary, Admn.II(B)

Copy to:-

1. Sr. PPS to Secretary (DST)
2. PS to JS (Admn.)

(Soumitra Basu)
Under Secretary to the Govt. of India
GUIDELINES FOR SETTLEMENT OF CLAIMS FOR COMPENSATION ON ACCIDENTS APPLICABLE TO THE DEPARTMENT OF SCIENCE AND TECHNOLOGY AND AUTONOMOUS INSTITUTIONS/SUBORDINATE OFFICES/BOARDS UNDER IT

PREAMBLE

Accidents are unfortunate incidents, occurrences of which cannot be obliterated completely, but can only be minimized by adopting most vigilant practices, safety precautions etc. Sometimes accidents do happen when responsibility and liability cannot be affixed on certain individuals or malfunctioning of certain machinery and the Law recognizes the Principle of 'No faulty Liability' for such unfortunate incidents. In such cases, the loss of life and loss of dependency cost of the dependents of such victims cannot be written off merely on the pretext that negligence on the part of Department or its agencies cannot be substantiated for want of stricter proofs. Also being in the public domain and mandated by the Constitution to work for the larger interest of the society, it is expected from the Department/Entities to pay a just compensation for any loss of life or a good life to victims or dependents of such victims in addition to the existing provisions under various welfare legislations. The Department being model employer is required to undertake certain duties.

The need of payment of such compensation by the Department to the sufferer of such accidents is recognized and stressed upon by the Hon'ble Courts in various judgments and more recently in FAO 154/2013 and & CM No 5185/2013, wherein Hon'ble High Court of Delhi has directed to frame standard policy of payment of compensation to the family of the victims who die or become permanently disabled while carrying out hazardous jobs at the sites or work places of Department. The Hon'ble Court recognizing the principle of Strict Liability has issued directions to frame the guidelines in consonance with the concept of Welfare State enshrined in the Constitution of India.

Keeping in view the above scenario and directions of Hon'ble High Court of Delhi in FAO 154/2013 & CM No. 5185/2013 in the matter of WRITER
SAFEGAURD LTD Versus COMMISSIONER under EMPLOYEES COMPENSATION ACT AND ORS, the draft Guidelines for payment of Compensation to the family of the victims who die or become permanently disabled while carrying out hazardous jobs in the Department is prepared and attached herewith which may be placed before the Hon'ble High Court. The main object and aim of these guidelines is to provide a comprehensive mechanism for calculation, application and settlement of claims for compensation in such matters in timely and equitable manner.

The amount of compensation recommended is based on the principle of just compensation as enunciated in various judgments of Hon'ble Supreme Court and relied upon in the aforementioned directions of the Hon’ble Court and keeping in line with the existing norms in paying compensation by Departments in cases of accidents in Road, Railways, Air transport and also in case of deaths occurring in natural calamities. Example may be seen in Railways wherein compensation is between Rs. 32,000/- to Rs. 4,00,000/-, while in Road Accidents it is upto Rs. 2,00,000/- and in accidents related to Airways maximum compensation is limited upto Rs. 10,00,000/-.

While formulating these Guidelines, it has also been considered that Department have Strict responsibilities towards well being of its employees and they have only that organization to depend upon in the event of the occurrence of any accident. In case of contractor employees, Department has implied and indirect responsibility towards their well being. Whereas in the case of a person who is neither Department’s employee not a Contractor’s employee, there is no direct or strict responsibility with respect to paying any compensation in case of death or injury due to accident, however, keeping in view the larger perspective of public welfare, Department must pay some compensation in their case also. They would also be eligible for compensation from their respective employers in addition to the compensation under these Guidelines. The Department shall also endeavor to make arrangement for first aid facility in the premises and the injured must be provided with the medical aid, at the earliest.
GUIDELINES FOR SETTLEMENT OF CLAIMS FOR COMPENSATION ON ACCIDENTS APPLICABLE TO THE DEPARTMENT OF SCIENCE AND TECHNOLOGY AND AUTONOMOUS INSTITUTIONS/SUBORDINATE OFFICES/BOARDS UNDER IT

1. **Title:** These guidelines would be called as Guidelines for Settlement of Claims for Compensation.

2. **Effective Date:** The guidelines would be effective from the date of the issue of the guidelines.

3. **Applicability:** These guidelines would govern the settlement of compensation claims arising out of accidents resulting into loss of life or permanent disability.

4. **Definition:**

   a) **Accident:** Any death or permanent disability resulting solely and directly from any unintended and unforeseen injurious occurrence caused during the maintenance, operation and provisioning of any public services undertaken by the Department.

   b) **Competent Authority:** Competent Authority means Secretary to Government of India in the Department or Head of the respective Autonomous Institution or Subordinate/Attached office.

   c) **Department:** Means Department of Science and Technology and for the purpose of the present Guidelines includes, any Public Sector Undertaking/Autonomous Institutions/Subordinate Offices, under the control of the Department.

   d) **Dependent:** As defined in the Employee’s Compensation Act, 1923.

   e) **Designated Officer:** An Officer designated by the Competent Authority of the Grade of Junior Administrative Grade (JAG) or equivalent for the purposes of receiving and processing claims for compensation under the present Guidelines.

   f) **Victim:** Any person who suffers permanent disablement or dies in an accident as defined in these Guidelines.
g) **Permanent Disablement:** A disablement that is classified as a permanent disablement under proviso to Section 2(l) of The Employee’s Compensation Act, 1923.

5. **Detailed Accident Report:** The report prepared by the police within a period of 30 days from the date of incident as per Schedule-I of this guidelines.

**Explanation:** For the purposes of the preparation of the detailed accident report, the word “injury” as referred in Schedule-I refers to “Permanent Disablement” as mentioned in clause 4(g) of the Guidelines.

6. **Extent of Liability:** On the occurrence of any “accident” as defined under these Guidelines, the Department shall whether or not here has been any wrongful act, neglect or default on its part and notwithstanding anything contained in any other law, be liable to pay compensation to such extent as prescribed below:

(i) In the event of death or permanent disability resulting from loss of both limbs: Rs.10,00,000/- (Rupees Ten Lakh)

(ii) In the event of other permanent disability: Rs. 7,00,000/- (Rupees Seven Lakh)

7. **Procedure for settlement of claims in respect of compensation.**

a) The victim or his/her dependents would make an application within a period of 90 days of the accident to the Designated Officer under whose jurisdiction the accident had occurred. The application should be accompanied by the following documents:-

(i) Proof of age of the victim.

(ii) Death certificate of the victim

OR
Permanent disability certificate issued by the Medical Board authorized by the Government.

(iii) Certified copy of FIR lodged in respect of the accident.

(iv) Proof of applicant’s relation with the victim/Dependency Certificate.

The Designated Officer may seek any further documents for settlement of claim to its satisfaction.

Provided that where there are more than one dependent, the Application must mention their name, addresses and relations with the victim and the Designated Officer may at its own discretion issue notices to all before releasing the compensation.

b) The Designated Officer on receipt of above application shall take into consideration the Detailed Accident Report submitted by the Police Authority would process the claim of compensation on priority basis but would not take more than 30 days for disposing off the same in any case.

c) The Designated Officer, in case where no application is received from the victim/dependents of victims, may on receipt of the detailed accident report proceed suo-moto to initiate the process for consideration for grant of compensation to the victim/dependents of victim.

d) With effect from the date of the present Guidelines, all contracts/agreements to be entered into by the Department with any person or agency for maintenance, operation and provisioning of public service would invariably include a clause whereby any compensation paid under these guidelines shall be recoverable from such person, agency or firm.

e) In no case a claim for appointment of any of the dependents on the compassionate grounds would be entertained by the Department.

8. Method of Disbursement of compensation

i. The amount of compensation so awarded shall be deposited in a Nationalized Bank or if the branch of a Nationalized Bank is not in existence, it shall be deposited in the branch of scheduled commercial
bank, in the joint or single name of the victim/dependent(s). Out of the amount so deposited, 75% (seventy five percent) of the same shall be put in a fixed deposit for a minimum period of one year and the remaining 25% (twenty five percent) shall be available for utilization and initial expenses by the victim/dependent(s) as the case may be.

ii. In the case of a minor, 75% of the amount of compensation so awarded shall be deposited in the fixed deposit account and shall be drawn only on attainment of the age of majority, but not before one year of the deposit. Provided that in exceptional cases, amounts may be withdrawn for educational or medical needs of the beneficiary at the discretion of the Department.

iii. The interest on the sum shall be credited directly by the bank in the saving account of the victim/dependent(s) on monthly basis.

9. **Appeal:** An appeal against the decision of the Designated Officer in respect of the amount of compensation or rejection of such claim shall be made to competent authority within a period of 30 days of such decision. The Competent Authority would decide the same within 30 days of receipt of such appeal.

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**SCHEDULE - I**

**Part- I- PARTICULARS OF THE ACCIDENT**

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<table>
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<tbody>
<tr>
<td>1</td>
<td>FIR No..., Date and Under Section</td>
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<td>2</td>
<td>Name of the Police Station</td>
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<tr>
<td>3</td>
<td>Date, Time, Place of the accident</td>
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<td>4</td>
<td>Who reported the accident to the police</td>
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<td>5</td>
<td>Name of the Person who took victim to the hospital and Name of the Hospital</td>
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<tr>
<td>6</td>
<td>Whether any hospital denied treatment to the Victim?</td>
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<td>7</td>
<td>Nature of the accident:-</td>
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<td></td>
<td>(i) Whether resulted in death or injury or both?</td>
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<td></td>
<td>(ii) Number of persons injured/died.</td>
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<tr>
<td>8</td>
<td>Name and Contact No. of the Investigating Officer</td>
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<tr>
<td>9</td>
<td>Name of the witnesses of the accident</td>
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<tr>
<td>10</td>
<td>Description of the accident</td>
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<tr>
<td></td>
<td>PART-II-IMPACT OF THE ACCIDENT ON THE VICTIMS</td>
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</tbody>
</table>
| 1. | **Death Cases:**  
   a) Name and Address of the deceased  
   b) Age  
   c) Gender  
   d) Education  
   e) Occupation  
   f) Income (Monthly)  
   g) Legal Heirs/ Guardian  
      i. Name  
      ii. Relationship  
      iii. Age  
      iv. Address  
      v. Contact No. |
| 2. | **Injury Cases (permanent disablement)**  
   a) Name and Address of the Injured  
   b) Age  
   c) Gender  
   d) Education  
   e) Occupation  
   f) Income (Monthly)  
   g) Details of family dependent of the victim  
      MLC No.  
   h) Nature of injuries  
   i) Name of the Hospital where injured treated  
   j) Whether victim refused medical treatment  
   k) Period of hospitalization  
   l) Period of treatment |
m) Whether treatment continuing
n) Name, address and contact number of the doctor(s) who treated the injured.
o) Whether the injured underwent any surgery? If yes, then give particulars.
p) Whether suffered any permanent disability.
q) Expenditure incurred on treatment, conveyance, special diet, attendant etc. Give details, if available.
r) Whether the injured got reimbursement of medical expenses from his employer or under a mediclaim policy. Give details, if available.
s) Whether the injured was provided cashless treatment by the Insurance Company?. Give details, if available.

3. Any other relevant information.

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PART -III- RELEVANT DOCUMENTS TO BE ATTACHED

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<tbody>
<tr>
<td>1.</td>
<td>First Information Report</td>
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<tr>
<td>2.</td>
<td>Photographs of the scene of the accident from all angles.</td>
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<tr>
<td>3.</td>
<td>Statement of the witnesses recorded by the Police.</td>
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<tr>
<td>4.</td>
<td>Scientific report, if the Victim was under the influence of any liquor/drugs.</td>
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<tr>
<td>5.</td>
<td>In case of Death</td>
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<tr>
<td></td>
<td>a) Post Mortem Report</td>
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<td></td>
<td>b) Death Certificate</td>
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<td></td>
<td>c) Photograph and proof of the identity of the Dead.</td>
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<td></td>
<td>d) Proof of legal representatives of the deceased.</td>
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<td></td>
<td>e) Photograph, specimen signatures attested by the bank and identity proof of the legal representatives of the deceased.</td>
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<tr>
<td>f) Treatment of the deceased with name and address of the Hospital.</td>
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<tr>
<td>g) Bank account No. of the legal representatives of the deceased.</td>
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<td><strong>6. In case of Injury</strong></td>
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<tr>
<td>a) MLC</td>
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<tr>
<td>b) Multi angled photographs of the injured.</td>
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<tr>
<td>c) Photograph, specimen signatures attested by the bank and identify proof the injured.</td>
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<tr>
<td>d) Disability certificate</td>
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<td>Any other relevant information.</td>
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**VERIFICATION**

Verified at_____ on this _____ of _____, that the contents of the above report are true and correct and the documents mentioned in Part III have been verified.

Station House Officer  
(Name and Stamp)  

Assistant Commissioner of Police  
(Name and Stamp)