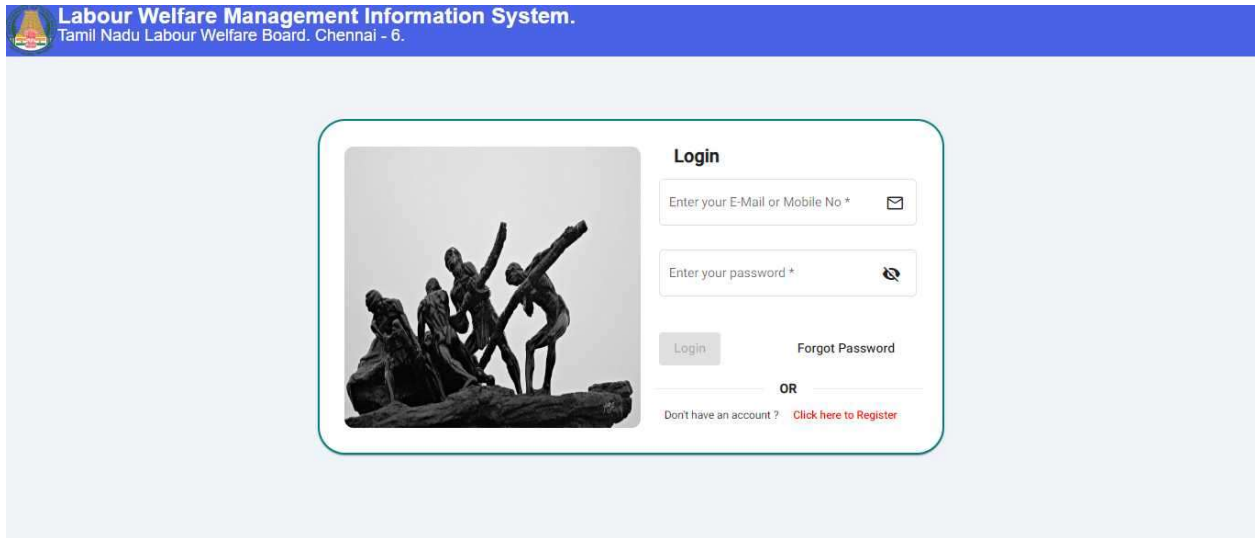


LWMIS Portal – User Guideline

Procedure to register on the LWMIS portal.

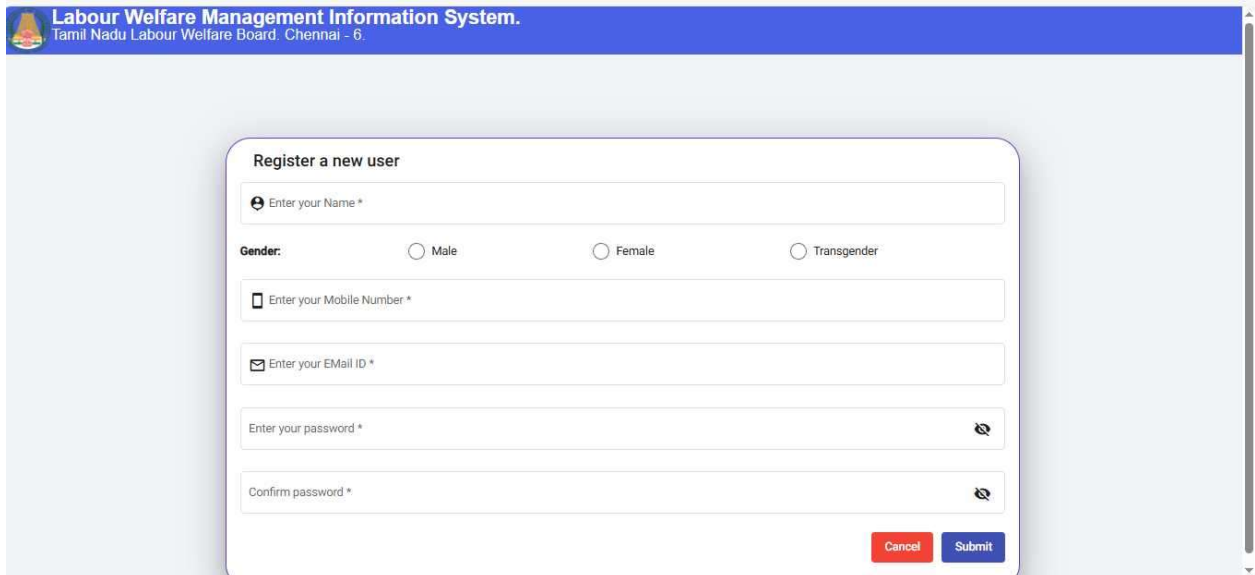
Stage -1



The screenshot shows the top navigation bar of the LWMIS portal with the logo and text: "Labour Welfare Management Information System. Tamil Nadu Labour Welfare Board. Chennai - 6." Below this is a "Login" form. On the left is a black and white photograph of a group of people. The form contains the following elements:

- Login** title
- Input field: "Enter your E-Mail or Mobile No *" with an envelope icon.
- Input field: "Enter your password *" with an eye icon.
- Buttons: "Login" and "Forgot Password".
- Separator: "OR".
- Link: "Don't have an account ? [Click here to Register](#)".

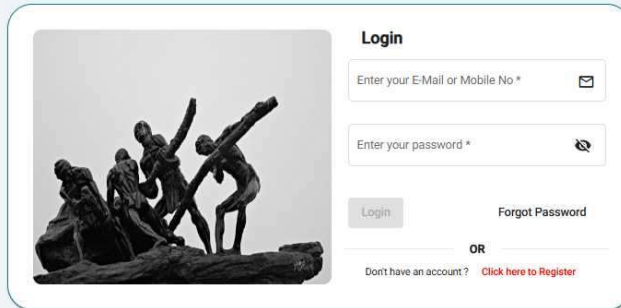
If the establishment do not have an account in LWMIS portal, then establishments shall use the “Click here to Register” option to get the credential for Login. After clicking the option it will redirect to the Application page.



The screenshot shows the registration form titled "Register a new user" on the LWMIS portal. The form includes the following fields and options:

- Input field: "Enter your Name *".
- Gender selection: Radio buttons for "Male", "Female", and "Transgender".
- Input field: "Enter your Mobile Number *".
- Input field: "Enter your EMail ID *".
- Input field: "Enter your password *" with an eye icon.
- Input field: "Confirm password *" with an eye icon.
- Buttons: "Cancel" (red) and "Submit" (blue).

The Person’s details should be given in the above screen to get the login credentials.



Login

Enter your E-Mail or Mobile No *

Enter your password *

Login Forgot Password

OR

Don't have an account? [Click here to Register](#)

After Created Login, you may use the credentials to login to the LWMIS portal.

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Tamil Nadu Labour Welfare Board, Chennai - 6. sathishkumar

Please Select the Establishment to Proceed Further. [+ New Establishment](#)

#.	Name	Act	Business Nature	Status	Actions
1	Technologies	Shops and Commercial Establishment	Software Industry	Active	

After Login to the Screen, Click “New Establishment” to add your Organization/ Establishment/ Institutions.

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Back

1 Firm Details

Have you Already Registered your Establishment with TNLWB ? *

None of the below

YES

NO

2 Firm Address Details

3 Contact Details of Establishment

4 Manpower Details

5 Documents

In the above screen, Please select whether you have already registered in TNLWB or not. If you have already registered Click Yes. Other wise Click No to proceed further.

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Back

1 Firm Details

Have you Already Registered your Establishment with TNLWB ? *

YES

Enter the Old Establishments Registration ID. *

* Please fill at least one detail.

Reset Submit

2 Firm Address Details

3 Contact Details of Establishment

4 Manpower Details

5 Documents

If you Click Yes, kindly enter your Existing Registration ID provided by the TNLWB.

Note: The registration number should be mentioned correctly.

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Tamil Nadu Labour Welfare Board, Chennai - 6.

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Back

1 Firm Details

Have you Already Registered your Establishment with TNLWB ? *

NO

Name of Establishment (As per ID Details) *
*Please Enter Name of Establishment

Registration/License Number *
*Please Enter Registration/License Number

Labour Act under which the Establishment is Registered/Licensed *
*Please Choose Labour Act

Nature of the Business.

Firm Mobile Number *
*Please Enter Firm mobile no.

Phone / Secondary Number
*Please Enter Phone No.

Email Address *
*Please Enter email of the Establishment.

Contact Person's FAX Number
*Please Enter Contact Person's FAX Number

Establishment Starts Date *
*Please Enter Establishment Starts Date

Required *

Reset Save

If you have clicked No, kindly fill the establishment details in the above screen.

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Tamil Nadu Labour Welfare Board, Chennai - 6.

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Back

Firm Status

Firm Details

3 Firm Address Details

Address of the Establishment *
*Please Enter Address of the Establishment.

District *
*Please Choose District.

Panchayat Type

Panchayat

Taluk

Locality/Area *
*Please Enter Locality of the Establishment.

Pin code *
*Please Enter pincode of the Establishment.

Landmark *
*Please Enter landmark of the Establishment.

Latitude No. *
*Please Enter Latitude No of the Establishment.

Longitude No. *
*Please Enter Longitude No of the Establishment.

Reset Save

Then kindly fill the address details of the Firm.

Labour Welfare Management Information System.
Tamil Nadu Labour Welfare Board, Chennai - 6.

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[Back](#)

- Firm Status
- Firm Details
- Firm Address Details
- 4** Contact Details of Establishment

Name of the Contact Person *

Contact Person's Designation *

Mobile Number * Phone / Secondary Number *

Contact Person's Email Address *

[Reset](#) [Save](#)

Then Kindly fill the contact details of the Firm

5 Manpower Details

Name of the Employer *

***UAN details are necessary for all the permanent employees.**

Select the CSV File to upload

<input type="text"/> Number of Permanent Male Employees *	<input type="text"/> Number of Permanent Female Employees *
<input type="text"/> Number of Permanent Transgender *	<input type="text"/> Number of Disabled Employees in above Permanent employees *
<input type="text"/> Number of Contract Male Employees *	<input type="text"/> Number of Contract Female Employees *
<input type="text"/> Number of Contract Transgender *	<input type="text"/> Number of Disabled Employees in above Contract employees *

[Reset](#) [Save](#)

In continuation of the Contact detail of the firm, kindly fill the details of the manpower available in your organization.

Kindly enter correct details of the employees count. The contribution of fund will be calculated based on the employee count provided in this section.

Please make sure the csv file satisfy the following condition.

1. Only a spreadsheet file with **.csv extension** is allowed others will be rejected.
2. Only upto **7 columns** are allowed.
3. Except date_of_leaving column all the columns must *not be* empty.
4. **UAN Number:** Only an *unique 12 digit numeric* values without any empty space is allowed.
5. **Employee Name:** Upto *50 Alphabetic Characters* including *. @ and [space]* are allowed.
6. **Employee Contact No:** Minimum of 10 to 12 digit numeric values are allowed.
7. **Date of Joining:** Must be in *mm/dd/yyyy (E.g: 12/25/2020)* format & lesser than or equal to current date or date_of_leaving.
8. **Date of Leaving (Optional Field):** Must be in *mm/dd/yyyy (E.g: 12/25/2020)* format & greater than joining date & lesser than current date.
9. **Gender:** Only a **M, F** and **T** characters are allowed.
10. **Differently Abled:** Must be **true** or **false**.

	A	B	C	D	E	F	G
1	uan_no	employee_name	employee_contact_no	date_of_joining	date_of_leaving	gender	differently_abled
2	123545454545	Vairamani	5454545454	9/18/2022	9/18/2023	M	TRUE
3	123456789012	Guna	6565656565	9/18/2022		M	FALSE
4	212545123212	Chitra	6545454545	9/18/2022		F	FALSE
5							

Select the CSV File to upload



In the attachment icon, the organization should upload the details of the employee based on the format given above. The organization should prepare a CSV file with the details of the employee using above format and upload in the Manpower details section.

6 Documents		S.No	Name	Type	Details	Document	Actions
1	EPFO NO Employees Provident Fund		Optional	No data Given			
2	ESIC NO Employees State Insurance Corporation(ESIC) Number		Optional	No data Given			
3	Establishment Functioning Establishment Functioning From Month & Year		Required *	No data Given			
4	TNEB Bill Electricity Boards Bills		At least One bill is Required *	No data Given			

In the Document Section, Kindly fill the mandatory fields and the organization shall fill the EPFO No and ESIC number with the relevant proof for completion of registration.



Employer Declaration :

I certify that the above mentioned particulars are true and to the best of my Knowledge.

Submit

After all details are filled, kindly click the Employer Declaration for successful submission of Application.


The screenshot shows the Labour Welfare Management Information System interface. The header includes the system name and the user's name, sathishkumar. The main content area displays a table of establishments with the following data:

#.	Name	Act	Business Nature	Status	Actions
1	Testing Account	Motor Transport Undertaking	Ginning Factories	Submitted For Verification.	 

Once the application is submitted, then Department/ Labour Welfare Board will review and approve/reject the submitted application for further process.

Stage -2

The screenshot shows the Labour Welfare Management Information System interface. The header includes the system name and the user's name, sathishkumar. The main content area displays a table of establishments with the following data:

#.	Name	Act	Business Nature	Status	Actions
1	Testing Account	Motor Transport Undertaking	Ginning Factories	Clarification Issued.	

After submitting the application, if any details mistakenly provided by the organization/Management, the department/ Labour Welfare Board shall raise a clarification to update further details. Then the "status tab" will be changed for clarification.

3 Firm Address Details

Address of the Establishment: 54, saligramam
 District *: Nagapattinam

Panchayat Type*: Town Panchayat
 Panchayat*: Thalanayar

Taluk*: Thirukkuvilai
 Locality/Area: thalanayar

Pin code: 611112
 Landmark: shopping compld

Latitude No.: 10.956053
 Longitude No.: 78.65577

View All 2
 SP / Superintendent
 Locality
 Time: 9:06 PM Date: 09/06/2024
 Remarks *: updated

Clarify

Update

After updating the correct details, kindly click update button.

Labour Welfare Management Information System.
 Tamil Nadu Labour Welfare Board. Chennai - 6. sathishkumar

Please Select the Establishment to Proceed Further. + New Establishment

#.	Name	Act	Business Nature	Status	Actions
1	Testing Account	Motor Transport Undertaking	Ginning Factories	Clarification Issued.	

After updating the clarification by the Organization/ Management, the "Status tab" will be changed.

Labour Welfare Management Information System.
 Tamil Nadu Labour Welfare Board. Chennai - 6. sathishkumar

Please Select the Establishment to Proceed Further. + New Establishment

#.	Name	Act	Business Nature	Status	Actions
1	Testing Account	Motor Transport Undertaking	Ginning Factories	Active.	

Once, the Department/ Labour Welfare Board has approved your submitted application, the Status tab will be changed to "Active". Now the organization, shall start to make the payments of Contribution of Fund, Unpaid Accumulation, Fines from employees, Deduction Under Payment of Wage Act., and Voluntary Donations.

Click the Organization Name to go to the Payments and Claims page.

Contribution of Fund:

Labour Welfare Management Information System.
 Tamil Nadu Labour Welfare Board, Chennai - 6.

sathishkumar

Home
My Payments
My Claims

Contribution Fund.
Other Payments

Arrears to be paid :

Note : If you have **already paid** for specific year then submit the correct **number of permanent & contract employee** details & tick the checkbox of that specific year.

Select	Sl.No	Year	Number of								Total Employees (PE+CE = A)	Contribution of			Total Amount Per Year (A * B)	Actions	
			Permanent Employees (PE = P1 + P2 + P3)				Contract Employees (CE = C1 + C2 + C3)					Employee (B1)	Employer (B2)	Total (B1 + B2 = B)			
			Male (P1)	Female (P2)	Trans (P3)	Differently Able Among PE.	Male (C1)	Female (C2)	Trans (C3)	Differently Able Among CE.							
Please select the previous year to make a payment for previous year.																	
<input type="checkbox"/>	1.	2024	1	1	1	1	1	1	1	1	1	6	₹20.00	₹40.00	₹60.00	₹360.00	
Grand Total															₹360.00		

Employer Declaration :

I certify that the above mentioned particulars are true and to the best of my knowledge.

PayNow

Click the “My Payments” option in Menu bar to see the above “Contribution of Fund” page.

The Organization/ Management/ Institution shall pay the present year Contribution through Online payment.

Contribution Fund.
Other Payments

Arrears to be paid :

Note : If you have **already paid** for specific year then submit the correct **number of permanent & contract employee** details & tick the checkbox of that specific year.

Select	Sl.No	Year	Number of								Total Employees (PE+CE = A)	Contribution of			Total Amount Per Year (A * B)	Actions	
			Permanent Employees (PE = P1 + P2 + P3)				Contract Employees (CE = C1 + C2 + C3)					Employee (B1)	Employer (B2)	Total (B1 + B2 = B)			
			Male (P1)	Female (P2)	Trans (P3)	Differently Able Among PE.	Male (C1)	Female (C2)	Trans (C3)	Differently Able Among CE.							
Please select the previous year to make a payment for previous year.																	
<input checked="" type="checkbox"/>	1.	2024	1	1	1	1	1	1	1	1	1	6	₹20.00	₹40.00	₹60.00	₹360.00	
Grand Total															₹360.00		

Employer Declaration :

I certify that the above mentioned particulars are true and to the best of my knowledge.

PayNow

Select the “Year” and Click Employer Declaration, and then click “Pay Now” option to go to the payment page.

Contribution Fund. Other Payments

Arrears to be paid :

Note : If you have **already paid** for specific year then submit the correct **number of per** box of that specific year.

Select	Sl.No	Year	Permanent Employees (PE = P1 + P2 + P3)					Differently Able Among PE.	Male (P4)	Contribution of			Total Amount Per Year (A * B)	Actions
			Male (P1)	Female (P2)	Trans (P3)	Employee (B1)	Employer (B2)			Total (B1 + B2 = B)				
payment for previous year.												₹0.00		

Employer Declaration :
 I certify that the above mentioned particulars are true and to the best of

Payment History :

Labour Welfare Boar...
Labour Welfare Management L...

₹ 360 +Fee

English

UPI, CARDS, AND NETBANKING

UPI / QR

Card

Netbanking
All Indian banks

This page will timeout in 14:30 minutes

PAY

PayNow

The Organization/ Management / Institution shall pay the Contribution through UPI, Debit/ Credit Card or Net banking facility.

Regular Receipt - Print / Download

Download

Print



1 of 1

- | +



Tamil Nadu Labour Welfare Board.

P.B No. 718, DMS Compound, Anna Salai, Teynampet, Chennai - 600 006

RECEIPT

Receipt No. : OLP/NG/MOT-TR Receipt Date : 10-06-2024
A-UND/2024/0/24/8
Register ID No. : NG/MOT-TRA-UND/2024/0
Received From : 54, saligramam
shopping complex,
Thirukkuvilai,
Thalanayar
Nagapattinam - 611112

S.No.	Year	No. of Employees (E)	Contribution			Amount (E * C)
			Employee	Employer	Total (C)	
1	2024	1	20.00	40.00	60.00	
Total						Rs.60.00

Amount Paid: Rs. 60.00

Amount (In Words): Sixty Rupees Only

Transaction No. : 7/2024/0/24-24

Date : 10-06-2024

Ref No.: pay_OKxojNLRVVoUrd

Drawn On : Testing Account

After making successful payment, the Online Receipt will be generated and it can be downloaded in PDF format for future use.

Labour Welfare Management Information System.
Tamil Nadu Labour Welfare Board, Chennai - 6.

Home My Payments My Claims sathishkumar

Contribution Fund. Other Payments

Select the Payment Category *

Unpaid Payment Accumulation (UPA)

No. of employees *


1

Year *

2023

Amount *

Enter the amount in rupees format

Details of employee in pdf format 

Reset Pay now

The Organization Shall make the Unpaid Accumulation, Fines from Employees, Deductions, Donations using the Other Payments option under My Payments menu.