Republic of the Philippines Department of Labor and Employment Regional Office No. IV Quezon City





For Period January 1, 2019 to December 31, 2019

1.	Name of Establishme	nt :	OMON GROUP INC		
2.	Address	4	2 nd Floor Fastech Blo	dg-1 Ampere St. LISP	-1
			Brgy Diemo, Cabuya	ao, Laguna 4025	
3.	Name of Owner		MS. XINMEI ZHAC)	
4.	Nature of Business	62 1		terprise and Export En	ternrise
	Number of Employee	s .	110	Number of Shift	: 1
6	Distribution of Emplo	vees as to	o nature / workplace, se	v and work chift	2 1 ₂
٠.	Distribution of Emple	yees as a	o nature / workplace, se	x and work sinit	12
	1 st	Shift	2 nd Shift	3 rd Shift	
	Mala 4	_			
		5	1.		
		5 -			
	Total 11	0			
_		12 22 23 23 23 23 23 23 23 23 23 23 23 23	7/2		
7.	Preventive Occupatio				
			es is organized / provide	ed by:	500
			ment / undertaking		
			authority / institution		37
	() oth	er bodies	/ group / institution (sp	ecify)	
		th service	es as described under 7a	above, is organized /	provided as a
	services				
			e workers of the establis		
	() cor	nmon to a	a number of establishme	ents / undertakings	
	ALTERNATION OF THE PROPERTY OF				
	c. The employer eng	The second secon		1	
	17.00		I health practitioner		
	Na	me	: Thursday D. l	Belita/ Safety Officer	
	Ad	dress	: Cuevas Subd Brgy	Tejeros Convention, Re	osario, Cavite
	(/) Oc	cupationa	l health physician		
	Na	me	: c/o Prima Care Med	lical Laboratory & Pol	lyclinic
	Ad	dress	: Ground Floor	Rosario Commercial	Center,
				ention, Rosario, Cavit	
	() Oc	cupationa	l health dentist		CONTRACTOR
	Na	3.00			
		dress			
			l health nurse		
	Na		· ·		
		dress			
	Au	uicss	•33		

92	2023							
d	d.	The occupational	health physician/	practitioner/	nurse/pers	sonnel conducts	an inspection	
		of the workplace			:			
			ce every month					
		() on	ce every two mo	nths				81
		() on	ce every three m	onths				
		(/) on	ce every six mon	ths				
		() oth	ner details					
8.		Emergency Occup	pational Health S	ervices :				
	a.	The employer pr	ovides a treatm	ent room /	medical o	clinic in the w	orkplace with	
		medicines					A COSS WAR	
		and facilities:						
		(/) yes	3					
		() no						
		() oth	ers, please specif	ý				
	b.	Schedule of attend	dance in the work	place:				
						Workshift		
		Occupational heal				hrs. /day		
		Occupational heal		•		hrs. /day		
		Occupational heal		:	20	8 hrs. /day		
		Occupational heal	th nurse	2		hours/day		
	c.	Schedule of attend	lance of full time	first aider				
		(/) 1 st	workshift workshift workshift				280	
		() 2 nd	workshift					
		() 3 rd	workshift					
	1000	Name of the last o						
	d.	The following oc	cupational healtl	personnel	of this es	stablishment ha	ve undergone	
		training in occupa			aid:			
			supational health					
			upational health					15
			upational health	nurse				
		The second secon	t aider					10
		() oth	ers, please specif	У				196
0		0 111						
9.	027	Occupational Heal		C.1				
	a.	The occupational			lishment	conducts regula	ir appraisal of	
		the sanitation syste	A Specifical production of the control of the contr		R.			
		(/) yes		()	no		
	h	Number of worker	s who undonwoo	t the following		: 1		
	b.	Number of worker	s who underwen	the following	ig medica	ii examinations		
			Phys	cal Examina	tion	Urinalysis	X-rays	
			Tilys	cai Examina	шоп	Offilarysis	A-lays	
		1 Pre-placement						
		2 Periodic						
		3 Return to work	•					
		4 Transfer						
		5 Special						
		6 Separation						
		77 CT 1 CT						

*

	2 P 3 R 4 T 5 S	eriodic	o work r			
10.			iseases			
a	. Num	iber of	consultation / treatment for	or the foll	owing diseases	
				Male	Female	Total Number cases
	Skin:					cases
	()	Allergy			
	()	Dermatoses			
	()	Infection as folliculitis			
	VIOR	-	Abscess/Parenchyma			
)	Fungal Infection			
	Head					
	1	j	Tension headache			
)	Others			
		1.	o more			
	Eye:					
	()	Error of refraction			
	(/)	Bacterial / Viral	1	1	2
			Conjunctivitis			
	()	Cataract			
	()	Poor Vision			
	Mont	h & EN	IT.			
	(n & Er	Gingivitis			
	ì)	Herpes Labiales/nasalis	,		
	Č	í	Otitis Media/Externa	18		
	ì	í	Deafness			
	(1	ĺ	Meniere's Syndrome/V	ertigo	2	2
	(/)	Rhinitis/colds	1		2 1
	()	Nasal Polyps			
	()	Sinusitis			
	()	Tonsillopharyngitis			
	()	Laryngitis			
	()	Other (dental caries)			
			(impacted cerum	ien)		
	Resn	iratory				髮
	()	Bronchitis			
	(1	í	Bronchial Asthma	1		1
	(í	Pneumonia			2.62
	Ì)	Tubercolosis			
	ĺ)	Pneumoconiosis			E3
	()	Others (Pulmonary Fibr	osis)		
			The state of the s	The second secon		

Stool Exam Blood Test

ECG Others

neal	n and i	blood vessel:			
(/	()	Hypertension	6	2	8
()	Hypotension			
()	Angina Pectoris			
()	Myocardial Infraction			
()	Vascular disturbances in			
	20111	extremities due to			
		continuous vibration			
				4	
			Male	Female	Total
			· · · · ·	Citiate	Numbe
					Cases
Gasti	rointes	tinal:			Cases
()	Gastroenteritis/Diarrhea			
(Ś	Amoebiasis			
(/	Ó	Gastritis/Hyperacidity		1	1
Ì	Ś	Appendicitis		•	1.00
ì	3	Infectious Hepatitis			
è	Ś	Liver Cirrhosis	W		
è	Ý	Hepatic Abscess			
è	Ś	Cancer (Hepatic/Gastric)			
2	1	Ulcer (Tepatic/Gastre)			
ì	3	Others (Hemorrhoids)			
(J	Others (Hemormolds)			
Geni	to Urin	arv.			
(/)	Urinary Tract Infection		6	(
(3	Stones		U	6
	3	Cancer			
(3	Others			
Renre	oductiv				
e	Odden			O	0
(/	- (Dysmenorrhea Infaction (Cominitie)		8	8
•	,	Infection (Cervicitis)			
(1	(Vaginitis)			
()	Abortion (Spontaneous)	1		
(Y	(Threaten	iea)		
>	7	Hyperemesis Gravidarum			
)	Uterine Tumors			
()	Cervical Polyp/Cancer			
()	Ovarian Cyst/Tumors			
()	Sexually Transmitted Dise	eases		
()	Hernia (Inguinal)			
		(Fernoral)			
()	Others (Breast Mass)		53	
Nimo		alon/Chalatal/Tail			
nuero	JIIIUSCI	ular/Skeletal/Joints:			
()	Peripheral Neuritis			
)	Torticollis			
)	Arthritis			1121
(/)	Others (Mild Scoliosis)		2	2

	Lymp	ohatics	and Circulatory:		
	()	Anemia		
	(-)	Leukemia		
	ì	Ó	Cerebrovascular Accidents		
	()	Lymphadenitis		
	(ĺ	Lymphoma		
	Ì)	Others		
	Infec	tious I	Diseases:		
	()	Influenza		
	ì)	Typhoid/Paratyphoid Fever		
	ì)	Cholera		
	ì	5	Measles	2	
	ì)	Mumps		
	ì	Ó	Tetanus		
	ì	í	Malaria		
	(Ś	Schistosomiasis		
	ì	5	Herpes Zoster		
	ì	5	Chicken Pox		
	?	5	German Measles		
	1	1	Rabies	1	9
	1	3	Others dengue 1	1	- 1
	1 ,	,	Others deligne		25
Diseas	es Due	e to Ph	ysical Environment:		
			ue to Noise and Vibration		
	()	Deafness (noise induced)		
	ì	Ś	White Finger Disease		
	ì	Ś	Musculo-skeletal disturbances		
	ì	Ś	Fatigue		
		,	, angue		
b.	Dise	ases D	ue to Temperature and		
			Abnormalities:		
			Hot Temperatures		
	()	heat strokes		
	Č	Ś	heat cramps		
	ì	Ś	dehydration		
	ì	Ś	heat exhaustion		
	2	í	others		
	1	1	Cold Temperature		
	1	1	chilblain		
	2	<	frost bite		
	}	3	immersion foot		
	((
		3	general hypothermia others		
•	Digg) 2000 D	oue to Pressure Abnormalities		
C.	Dise	ases D			(6)
		~	Decompression Sickness Air embolism		
	(?			
	(?	Bends diseases		fă.
)	Barotrauma		
	()	Hypoxia		
	(D:-)	Altitude Sickness		
d.	Disea	ases D	ue to Radiation		
)	Cataracts		
	()	Keratitis		
	()	Burns		
	()	Radiation related cancers		

11. Report of Occupational Acciden	ns / mju	1162						
Nature			Male		Fema	le		Number of cases
Contussion, bruises, hermat	oma							
Abrasions								
Cuts, lacerations, punctures								
Concussion								
Avulsion								
Amputation, loss of body pa	rta							
	ues							
Crushing injuries								
Spinal injuries								
Cranial injuries								
Sprains								
Dislocation / Fractures			2					2
Burns								
12. Immunization Program								
Tetanus Toxoid Injection								
Tetanus Antitoxin Injection								
Tetanus Gloulin Injection								
Hepatitis B Vaccine								
Others (please specify)								
Grand Leady								
13. Keeping of Medical Records of	Workers	(nle	ace mark	ed)				
(/) done	WOIKCIS	(pic	(not do	ma		
(/) done			L)	not uc	ne		
14. Health Education and Counselli (/) done individu () done in organ () done with the leaflets, etc.	ually as e nized gro	ach v up di	worker co	omes to / semin	the clin			
15. Other Health Program (please n	narked)				184			
Person Automotive Proceedings (Proceding Control of Co					2			
Kind of Program	Semina	ar		Use	of Visua	ıl		
Counseling				F-100 C T T T T T T T T T T T T T T T T T T	Materia	5/0		
Nutrition Program								
Maternal and Child Program								
Family Planning Program								
Mental Health Activities								
Personal Health Maintenance								
Physical Fitness Program	90. 9					10		
Sports Activities	(/)	Yes			()	No
Others (please specify)	(/)	Yes			()	No

16. Hazards in the workplace (please marked and give details of the substance)

	· Here			ubstance and/or sources	Number of workers exposed
a.	Chen	nical F	Hazards		
	()	Dust (ex. Silica, dust)		
	(/)	Liquids (ex. Mercury)	flux	22
	(/)	Mists/fumes/vapors	tinning pot	22
	()	Gas (ex. CO, H2S)		
	()	Others (ex. Solvent)	Si .	
b.	Physi	ical H	azards		
	()	Noise		
	Ì)	Temperature / humidity		
	Ì)	Pressure		
	()	Illumination		
	ì)	Ultraviolet, infrared, microwave	e	
	()	Vibration		
	()	Others (please specify)		
C.	Biolo	gical	H <mark>azards</mark>		
	()	Viral		
	ì	í	Bacterial		
	Ì)	Fungal		
	()	Parasitic		
	()	Others		Sec. 1997
d.	Ergoi	nomic	Stress		
	()	Exhausting physical work		
	è	Ś	Prolonged standing		
	ì	í	Low back pain		
	ì	í	Unfavorable work pressure		
	Ì	í	Static monotonous work		
	Ì	ý	Others		
Pre	epared	by:		Noted By:	

Ms. Camille Tiongco HR Supervisor

Ms. Perlita Barraca **Managing Director**

Republic of the Philippines Department of Labor and Employment

NATIONAL WAGES AND PRODUCTIVITY COMMISSION REGIONAL TRIPARTITE WAGES AND PRODUCTIVITY BOARD

Pursuant to Section 3 or the Wage Rationalization Act and Chapter III of the implementing Rules, any person, company, corporation, partnership or any entry engaged in business shall submit this form properly accomplished to the appropriate Regional Tripartite Wages and Productivity Board, not later than January 2002.

nent No. of Working Hours /Year
45 2,296 hours / year 65 110
Amount of Wage Increase thru CBA for 1990 (Average per year) TO EMPLOYEE / WORKERS (please check

BONUS / SERVICES

(/)	Vacation	5 days / year	(/)	13th Month Pay
(/)	Sick	5 days / year	(/)	Mid Year
(/)	Maternity	105 days / year	14 528	(/) Year End
(/)	Paternity	7 days / year	()	Productivity / Performance
(/)	Others, SIL	3 days / year	()	Profit Sharing
			(/)	Medical / Dental
			(/)	Meal Allowances / Subsidiaries
			(1)	Transportation Allowances
			()	Others, Housing Allowance

	DULE ROIV-A
LACU	IA PROVINCIAL OFFICE
ř	ECEIVED

JAN 1 5 2020

No.	Emp. ID#	Employee Name	Employment Satus	Basic Salary	13th Month Pay
1	OGI-001	Zhao Xinmei	Regular	66,000.00	66,000.00
2	OGI-003	Bustamante, Rosemarie Jean P.	Regular	27,566.00	27,316.00
3	OGI-005	Plopenio, Rosegen E.	Regular	14,941.00	14,658.82
4	OGI-006	Ramos, Evangeline A.	Regular	38,066.00	37,490.60
5	OGI-011	Bautista, Zylvettee	Regular	28,000.00	27,634.01
6	OGI-017	Ventura Jack	Regular	18,666.00	18,457.67
7	OGI-018	Redondo Carousel	Regular	15,300.00	15,026.89
9	OGI-021	Macuha Roselle	Regular	27,041.00	26,341.96
10	OGI-023 OGI-024	Lambino Roselyn	Regular	21,200.00	20,937.08
11	OGI-025	Milan Edgar	Regular	14,316.00	14,101.89
12	OGI-023	Nocum John Paul Beltran Janelle	Regular	16,491.00	15,676.85
13	OGI-035	Legamia Marcelino	Regular Regular	14,216.00 13,691.00	11,902.36
14	OGI-037	Papag Arvin Jacob	Regular	25,000.00	13,461.46
15	OGI-039	Nazareno Donato	Regular	12,436.06	24,577.06 11,213.35
16	OGI-045	Cerdena Catherine	Regular	13,941.00	13,699.19
17	OGI-054	Carpio Jomar	Regular	13,991.00	13,608.23
18	OGI-055	Arce Desiree	Resigned	15,551.00	21,811.57
19	OGI-057	Maglente Arlene	Regular	20,000.00	17,448.38
20	OGI-063	Torre Manilyn	Regular	11,900.00	11,776.82
21	OGI-068	Martinez Richard	Regular	14,516.00	13,786.17
22	OGI-072	Valguna Nikki	Regular	12,426.36	11,517.79
23	OGI-078	Benter Mark Joseph	Regular	12,216.00	11,748.21
24	OGI-082	Buenviaje Cristel	Regular	14,516.00	14,049.84
25	OGI-089	Payongayong Michelle	Regular	11,182.86	10,186.79
26	OGI-097	Tian Cai	Regular	16,166.00	16,166.00
27	OGI-098	Peregrino Dinzel Paul	Regular	11,676,34	10,548.68
28	OGI-099	Dagandan Mark Christian	Regular	13,066.00	12,755.41
29	OGI-104	Moral Jeraldyn	Regular	12,026.36	11,523.04
30	OGI-113	Velasco Maricel	Regular	11,726.26	10,798.86
31	OGI-114	Montano Abigail	Regular	11,816.00	11,552.33
32	OGI-116	Pallesco Rhazel	Regular	11,432.98	10,469.38
33	OGI-133	Tiongco Camille	Regular	14,800.00	13,520.22
34	OGI-134	Zhao Jing	Resigned		11,286.36
35	OGI-135	Velasco Jimmel	Regular	22,866.00	19,516.00
36	OGI-136	Ezperanza Jane	Regular	12,526.36	17,486.21
37	OGI-138	Belita Thursday	Regular	16,000.00	19,433.00
38	OGI-143	Relox Remil	Regular	11,182.86	10,719.86
39	OGI-147	Tiu Jonathan	Regular	23,366.00	19,262.61
40	OGI-159	Monteroso, Nazario	Regular	11,300.00	10,394.52
41	OGI-167	Cabato, Melessa	Resigned		6,088.74
42	OGI-168	Climacosa, Melissa	Regular	10,948.08	10,036.53
43	OGI-170	Hallares, Lurine	Regular	20,500.00	13,846.89
44	OGI-174	Bruce, Lean Rey	Regular	15,500.00	14,046.09
45	OGI-175	Ong, James	Regular	13,500.00	13,191.24
46	OGI-177	Factor, Joselito	Regular	14,300.00	13,740.47
47	OGI-178	Abila, Elbert	Regular	23,000.00	18,541.06
48	OGI-179	Hallares, Arthur	Regular	12,500.00	17,316.51
49	OGI-192	Bocalan, Mirla	Regular	10,897.90	11,364.38
50	OGI-195	Bete, Edgar	Resigned		7,364.30
51	OGI-196	Torres, Kenneth	Resigned		6,080.64
52	OGI-198	Salmorin, Nicqoule	Regular	11,198.00	10,837.15
53	OGI-200	Papag, Melinda	Regular	15,300.00	12,532.69
54	OGI-201	De Aro, Milany	Regular	13,000.00	13,677.13
55	OGI-205	Dela Vega, Joan	Regular	12,500.00	12,541.63
56	OGI-206	Matus, Reyno	Regular	11,300.00	11,732.52
57	OGI-209	Flores, Wilma	Regular	13,000.00	11,645.83
58	OGI-210	Calulo, Deyve Cris	Regular	11,100.00	10,602.72
59	OGI-211	Caturan, Julie Ann	Regular	13,300.00	11,610.03
60	OGI-212	Penesa, Maureen Mae	Regular	13,000.00	12,795.66
61	OGI-214	Madraso, Elioteria	Regular	12,400.00	11,587.04
62	OGI-215	Rasonable, Kimberly	Regular	12,400.00	12,104.40
63 64	OGI-216	Bersabe, Ma. Willeani	Regular	9,698.00	10,134.19
Annual Control of the	OGI-219	Garcia, Marlon	Regular	11,000.00	9,866.92
65	OGI-220	Ducay, Joven	Regular	10,398.00	10,105.32
66 67	OGI-221	Gonzales, karen Cocaine	Regular	10,697.96	10,017.31
	OGI-223	Pangilinan, Dhalia	Regular	12,500.00	10,435.91
68	OGI-227	Cadiz, Leny Rose	Regular	11,000.00	11,182.68
69	OGI-233	Ocampo, Michael Vince	Regular	9,698.00	9,524.44
70	OGI-234	San Ramon, Ma. Clariza	Regular	9,698.00	8,220.05
71	OGI-236	Panimdim, Johel	Regular	9,698.00	7,833.00
72	OGI-241	Lopez, Princess Djizell	Resigned		5,229.16

73	OGI-243	Loriaga, Leslie Ann	Regular	9,698.00	7,506.63
74	OGI-244	Garcia, Rose Ann	Regular	9,698.00	7,982.71
75	OGI-245	Carampot, Darren	Resigned	0,000.00	6,041.09
76	OGI-246	De Guia, Jenny	Regular	11,000.00	7,592.59
77	OGI-248	Callos, Albert	Regular	13,000.00	8,767.42
78	OGI-249	Nieva, Ronjay	Resigned	10,000.00	4,600.33
79	OGI-251	Hermoso, Elaine	Regular	9,698.00	6,496.16
80	OGI-252	Cuenca, Nino	Regular	9,698.00	6,496.98
81	OGI-254	Barraca, Perlie	Regular	40,000.00	17,738.64
82	OGI-255	Sabado, Cesar	Resigned	10,000.00	4,021.75
83	OGI-256	Malapaya, Patricia Nadine	Resigned	10,000.00	5,947.13
84	OGI-258	Glorioso, Mary Jane	Resigned	10,000.00	1,434.67
85	OGI-259	Reno, Michael	Regular	9,698.00	6,045.71
86	OGI-260	Olivan, Anna Margarita	Regular	9,698.00	5,843.67
87	OGI-261	Capapas, Regen	Regular	13,000.00	9,591.35
88	OGI-262	Macunat, Noel	Resigned	10,000.00	2,175.83
89	OGI-263	Catalasan, Arjay	Resigned	10 2000	916.96
90	OGI-265	Rubio, Lyra Sofia	Regular	14,000,00	6,708.33
91	OGI-266	Banawa, Adrin	Regular	9,698.00	4,197.69
92	OGI-267	Patriarca, Rolan Ruzel	Resigned	0,000.00	3,108.33
93	OGI-268	Sisracon, Ailyn	Probationary	13,000.00	5,604.17
94	OGI-269	Magallano, Jenny	Resigned	10,000.00	282.05
95	OGI-270	Arandid, Monina,	Probationary	9,698.00	4,009.75
96	OGI-271	Reynante, Elsa	Probationary	9,698,00	3,543.50
97	OGI-272	Oliva, Renato	Probationary	11,000.00	3,701.92
98	OGI-274	Baron, Romel	Resigned		141.03
99	OGI-275	Torrecarion, Jeff	Probationary	15,000.00	4,879.81
100	OGI-276	Jordan, Darwin	Resigned	10,000.00	1,783.65
101	OGI-277	Bajoyo, Alailah	Probationary	11,000,00	3,120.19
102	OGI-278	Pacis, Rechel	Probationary	11,000.00	2,750.00
103	OGI-279	Bayubay, Arcely	Resigned	11,000.00	1,787,29
104	OGI-280	Alfaro, Eleonor	Probationary	9,698.00	2,238.00
105	OGI-281	Saliniaga Alvin	Probationary	9,698.00	1,771.75
106	OGI-282	Nival, Maryland	Resigned	0,000.00	1,041.67
107	OGI-283	Poral, Joebert	Probationary	9,698.00	1,414.29
108	OGI-284	Go, Cherry	Probationary	18,000.00	2,769.23
109	OGI-285	Curaza, Norman	Probationary	9,698.00	963.58
110	OGI-286	Serrano, Angelica B.	Probationary	11,000.00	669.87

Total .

₱ 1,211,379.83

Noted By: Photom





Republic of the Philippines DEPARTMENT OF LABOR AND EMPLOYMENT Regional Office No. IV - A (CALABARZON)

Laguna Provincial Office

JAN 1 5 2020

REPORT ON COMPLIANCE WITH P.D. NO. 851 FOR THE YEAR 2019

1. Name of Establishment	:. OMON GROUP INC.
2. Address	200 FUR. FASTECH BLOG-1. LOR. MEST ROAD 1469-1 BRBY DIEZMO, CABUYAO, LAGUNA
3. Principal Product of Business	manufacturing 4 NAREHOUSING
4. Total Employment	: 110
5. Total Number of Workers Benefited	;
6. Amount Granted per Employee	1,211, 379. 89
7. Total Amount of Benefits Granted	1711, 379.83
8. Name of person giving information Positon	CAMILLE TIONGLO .
Telephone No.	: 049 (IM-8882 88A)
	for the second

NOTE:

1. Amount and payment of 13th month pay. The minimum 13th month pay required by P.D. 851 as amended should not be less than one twelfth (1/12) of the basicpay within a calendar year and should be paid not later than December 24 of each year.

Owner / Manager

- Section 8 of P.D. 851 as amended. Every covered employer shall make a report on compliance to the nearest Regional/Provincial Office on or before January 15 of each year.
- 3. Attach payrolls / vouchers duly signed by the employees as proof of compliance.

CERTIFICATION

I hereby certify that the above information is true and correct

Ms. Perlita Barraca Managing Director OMON GROUP INC.

SUBSCRIBED	AND SWORN to befo	ore me this day of Janu	iary 2020, employer
exhibiting his	Number	issued on	at

NOTARY PUBLIC

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Page No.
Book No.
Series of 2020



Atty. Ma. Fatima Ungson-Liu

Unit 109 Humana Weliness Ctr. Sta. Rosa City, Laguna Notary Public for the City of Sta. Rosa, Laguna Until December 31, 2021 Roll No. 46385, IBP LRN no. 03411 MCLE no. VI-0024880/4-17-19 TIM no. 172-447-973-000

PTR no. 3930181/01-02-2020/Sta. Rosa, Laguna

Republic of the Philippines Department of Labor and Employment Regional Office No. IV

BUREAU OF WORKING CONDITIONS

REPORT ON HEALTH AND SAFETY ORGANIZATION

Date

January 20, 2019

Name of Establishment

OMON GROUP INC.

Address

2nd Floor Fastech Bldg-1 Ampere St., LISP-1,

Brgy Diezmo, Cabuyao, Laguna 4025

Nature of Business

Logistics Service Enterprise and Export Enterprise

Number of Persons Employed (Including Management):

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110

1st Shift

Male 45

Female

65

2nd Shift 3rd Shift

Male Male Female Female

TOTAL

Male 45

Female

65

A. POLICY AND PROGRAM ON HEALTH AND SAFETY:

"WORK SAFELY FOR YOUR OWN SAFETY"

Training on First Aid Treatment Training on Basic Occupational Health and Safety Training on Basic Fire Prevention and Safety Medical Examinations

B. COMPOSITION OF HEALTH AND SAFETY COMMITTEE:

Type

Name

Position in the Establishment

Chairman:

Roselle Macuha

Quality & IT Manager

Health and Safety Officer: Thursday Belita

QC Engineer

Full- Time First Aider:

Laguna Team

Rosegen Plopenio

Accounting Staff

Reno Matus

Company Driver

Cavite Team

Manily Torre

Production Coordinator

Deyve Cris Calulo

Logistics Coordinator

Members:

Perlita Barraca Evangeline Ramos

Elbert Abila Johnatha Tiu

Zylvettee Bautista

Managing Director BD Manager

Warehouse/ Facility Manager Production and Engr. Manager

Sales Manager

Secretary:

Thursday Belita

QC Engineer

C. TECHNICAL INFORMATION:

Brief description of process operation and number and kind of equipment.

Process Operation

1. Material Receiving - Import received from warehouse

2. IQC

- Incoming quality inspection

3. Production

- Process cutting, stripping, cleaning foil, tinning, slitting, FBI

4. Q.C. 5. Warehousing Warehouse outgoing QC.Packing & storage of goods.

6. Delivery

- Delivery of goods to the customer.

Equipment

a. Machineries & Equipment

b. Furniture & Fixture

c. Tools & Jigs

d. Office Equipment

e. Automobile

f. Leasehold Improvement

Noted By:

Ms. Perlita Barraca Managing Director

Republic of the Philippines Department of Labor and Employment Regional Office No. IV

RECEIVED

JAN 1 5 2020

OCCUPATIONAL SAFETY AND HEALTH SECTION

Date :

January 20, 2020

ANNUAL WORK ACCIDENT / ILLNESS EXPOSURE DATA REPORT

Name of Establishment

OMON GROUP INC.

Address

2nd Floor Fastech Bldg1 Ampere St., LISP-1,

Brgy Diezmo, Cabuyao, Laguna 4025

Nature of Business

Logistics Service Enterprise and Export Enterprise

Exposure Data (January 01, 2019 to December 31, 2019)

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Number of Employees	•	92	
Total Hours Work by all	•	2,296	hours/year
Employees During the year	1	110	3
Injury Summary	- 176 - 176	0	
Total All Disabling Injuries/Illness		0	
Total Non Disabling Injuries/Illness	2.5	0	
Frequency Rate	:	320	

Ms. Perlita Barraca Managing Director

 This report shall be accomplished with or without accident/illness occurrence during the period covered and submitted to the Regional Labor Office or Local Government having jurisdiction, not later than 30th day of the month following the end of each calendar year.

2. Frequency Rate is the total number of disabling injuries per million employees hours exposure

Frequency Rate

No. of disabling injured * 1,000,000.00

Employee's hours of exposure

3. Severity Rate is the total number of days lost or change per million hours of exposure

Severity Rate

No. of days lost of exchange * 1,000,000.00

Employee's hours of exposure

4. Exposure is the total number of hour's works by all employees in each establishment including employees or operating production, maintenance, transportation, clerical, administrative, sales and other department.

5. Disabling injuries – work injuries which result in death permanent partial disability or

temporary disability.

6. Non-disabling injuries (Medical Treatment) – injuries which do not result into disabling injuries but required first-aid or medical attention of any kind.