STATUTORY INSTRUMENTS

1973 No. 6

FACTORIES

The Notice of Industrial Diseases Order 1973

Made - - - 1*st January* 1973

Coming into Operation 1*st February* 1973

The Secretary of State in exercise of powers conferred by section 82(3) of the Factories Act 1961(**a**) and now vested in him(**b**) and of all other powers enabling him in that behalf, hereby makes the following Order:—

1.—(1) This Order may be cited as the Notice of Industrial Diseases Order 1973 and shall come into operation on 1st February 1973.

(2) The Notice of Industrial Diseases Order 1964(**c**) is hereby revoked.

2. The Interpretation Act 1889(**d**) shall apply to the interpretation of this Order as it applies to the interpretation of an Act of Parliament, and as if this Order and the Order hereby revoked were Acts of Parliament.

3. The written notice of cases of certain industrial diseases required to be given under section 82(3) and (4) of the Factories Act 1961 shall be in the form set out in the Schedule to this Order and shall be accompanied by the particulars therein specified.

Signed by order of the Secretary of State.
1st January 1973.

John H. Locke,
Deputy Secretary,
Department of Employment.

(**a**) 1961 c. 34.
(**b**) S.I. 1968/729 (1968 II, p. 2108).
(**c**) S.I. 1964/369 (1964 I, p. 555).
(**d**) 1889 c. 63.

Article 3 SCHEDULE

DEPARTMENT OF EMPLOYMENT, H.M. FACTORY INSPECTORATE

F 41

Form prescribed by the Secretary of State

To be filled in by District Inspector

NOTICE OF CASE OF POISONING OR DISEASE

DISTRICT .....

occurring in a factory or in other premises or places to which the provisions of section 82(3) *and* (4) *of the Factories Act* 1961 *apply*

No. OF CASE.....

1. Occupier of factory (or person carrying on processes at docks and certain other places)

(a) Name.....

(b) Address.....

(c) Industry.....

2. Actual employer (if other than above)

(a) Name.....

(b) Address.....

3. Place where person affected had been working

(a) Address (if different from 1(b) above).....

(b) Exact location.....

(c) Nature of work carried on there.....

.....

4. Person affected

(a) Full name (surname first).....

(b) Sex..... Age..... Precise occupation (avoid the term labourer where possible).....

(c) Address.....

.....

5. Nature of poisoning or disease

.....

6. Notifications Has the case been : **(a)** reported to the Employment Medical Adviser? .....

(b) entered in the General Register?.....

.....

Signature of Occupier etc..... *Date*.....

EXPLANATORY NOTE

(This Note is not part of the Order.)

This Order prescribes the form of written notice required by section 82(3) and (4) of the Factories Act 1961 to be sent to the factory inspector for the district and to the employment medical adviser in charge of the area in which the factory is situate, of every case of certain industrial diseases occurring in a factory or in other premises or places to which the provisions of section 82 of the Act apply.

The form prescribed by this Order supersedes that prescribed by the Notice of Industrial Diseases Order 1964, which is revoked.

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