

Office of the
Commissioner of Police,
Cyberabad.

No.13/CP-Camp/Cyb/2020

Date: 08.05.2020


C I R C U L A R

Sub:- Covid-19 - Operational guidelines for IT/ITES companies during the Phase-3 of lockdown upto 29th May, 2020 - Communicated - Reg.

Ref:- 1. G.O. Ms.No.64, dtd.07.05.2020.
2. Minutes of meeting with Industry Bodies dtd.08.05.2020.

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In view of the lockdown orders issued vide GO in the above reference, the operational guidelines for IT/ITES companies during the Phase-3 of Lockdown upto May 29, 2020 as finalized after deliberations with the stakeholders are communicated herewith for the information and compliance by all the companies concerned.


Commissioner of Police,
Cyberabad.

Copy to all the IT/ITES companies.

Minutes of Meeting

Based on the discussions we had along with representatives of Industry bodies SCSC, Hysea & Nasscom, the following guidelines have been agreed upon for operationalizing GO Ms No.64 dated 7th May 2020. Suggested to be implemented from 11-May-2020.

We request you to kindly approve and issue the guidelines for immediate implementation.

Date: 8th May 2020 @ 12 Noon at CP Cyberabad Chambers

Members Present:

Sri. VC Sajjanar, IPS., CP-Cyberabad
Sri. Vijay Kumar, IPS., DCP, Traffic, Cyberabad
Sri. Krishna Yedula, Gen Secretary, SCSC
Sri. Venkat Tankasala, Jt. Secretary, SCSC
Sri. Bharani Aroll, President Hysea
Sri. Tanmoy Mukherjee, Nasscom
Sri. PCS Reddy, AD-SCSC

Guidelines

Reference to GO Ms No.64 dated 7th May 2020 allowing private offices including IT-ITES can operate with up to 33% strength in Red Zones including GHMC area (outside of containment zones) with remaining persons working from home, below movement guidelines may be followed:

1. Companies to follow staggered timings (Login between 7 am to 10 am; Logout between 3 pm to 6pm). Management of IT Parks and large IT campuses to enforce and monitor this on a daily basis.
2. Companies to issue authorization letter to the identified employees, falling under this maximum limit of 33% authorizing them to come to office & work. Route details must be mentioned in such authorization letters as per template attached.
3. Employees to carry this authority letter along with their company ID cards while commuting to & fro between residence & office. Such authority letter along with ID card must be produced to Police upon enquiry.
4. For company hired cabs, separate authorization letters mentioning vehicle number may be issued. No authorization letter shall be issued to cab drivers.
5. Such employees are allowed to commute between office & residence only
6. Companies shall strive to engage buses to the maximum extent, following social distancing norms to reduce the no. of individual vehicles on the road

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7. Movements are strictly restricted during curfew hours (7pm to 6am). For movement of staff for critical operations during curfew timings, the passes issued by police earlier shall be used.
8. 33% of strength is across all shifts including critical operations.
9. It is highly recommended to ramp up the operations gradually to 33%, without rushing immediately keeping in view to contain the spread of Covid-19

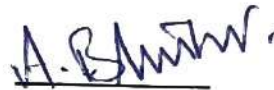
All other guidelines specified in GO Ms No.64 dated 7th May 2020 including social distancing norms, ensuring facial masks, personal hygiene and also keeping regular watch on the health of employees etc, to be adhered to very strictly!



Sri VC Sajjanar, IPS.,
Commissioner of Police
Cyberabad



Krishna Yedula
Gen Secretary
SCSC



Bharani Aroll
President
Hysea



Tanmoy Mukherjee
Regional Manager
Nasscom

On company letter Head

Letter No. _____ Date of Issue

EMPLOYEE AUTHORISATION LETTER

Name of the Employee	
Employee Number	
Employee Residence address	
Office Address	
Route Details	

Signature

Name of the authorized Signatory

Designation

Company Seal

Note: In case of any misuse, kindly contact

Name _____ Email _____ & Mobile number

_____ (Details of the person responsible in the issuing organization)

On company letter Head

Letter No. _____ Date of Issue

CAB AUTHORISATION LETTER

Registration Number of the vehicle	
Transport Operator/Owner of the Vehicle	
Name of the IT Company	
Route Details	

Signature

Name of the authorized Signatory

Designation

Company Seal

Note: In case of any misuse, kindly contact

Name _____ Email _____ & Mobile number _____
_____ (Details of the person responsible in the issuing organization)