

Form No. 6

(Prescribed Under Rule 23)

Humidity Register

Department.....

Distinctive mark of number.....

Hygrometer

Position in department.....

Year.....

Month.....

Reading of hygrometer								
Date	Between 7 and 9 a.m.		Between 11 a.m. and 2 p.m. (but not in the rest interval)		Between 4 and 5.30 p.m.		Remarks	Signature of The Person Taking the reading
	Dry Bulb	Wet Bulb	Dry Bulb	Wet Bulb	Dry Bulb	Wet Bulb		
1	2	3	4	5	6	7	8	9
1 st								
2 nd								
3 rd								
4 th								
5 th								
6 th								
7 th								
8 th								
9 th								
10 th								
11 th								
12 th								
13 th								
14 th								
15 th								
16 th								
17 th								
18 th								
19 th								
20 th								
21 st								
22 nd								
23 rd								
24 th								
25 th								
26 th								
27 th								
28 th								
29 th								
30 th								
31 st								

Certified that the above entries are correct

(Signed)

(Signed)