Form – IV (See rule 13) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

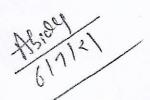
SI. No	Les Cresses 2	National Property.	
1	Particulars of the Occupier		
	(i) Name of the authorized person (occupier	4=	
	or : operator of facility)	* •	Ms Abida Khadun
	(ii) Name of HCF or CBMWTF	1:	Che priming and the
	(iii) Address for Correspondence	1:	Sye- Quision Put yd
	(iv) Address of Facility	1:	This plant for & fra lash
	(v)Tel. No, Fax. No	1:	Guil lines (court load)
	(vi) E-mail ID	1:	Aug Man record Road
	(vii) URL of Website	1:	Murafferenager-25/50)
	(viii) GPS coordinates of HCF or CBMWTF	1:	
	(ix) Ownership of HCF or CBMWTF	•	(State Government or Private or Semi Govt or any other)
	(x). Status of Authorization under the Bio- Medical Waste (Management and Handling) Rules	* *	Authorisation No.:
	(xi). Status of Consents under Water Act and Air Act	· ·	…OL の 1222a Valid upto: フルッフ/2 Valid upto:
	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 0
	(ii) Non-bedded hospital	:	W.
	Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		A day care Hospital
	(iii) License number and its date of expiry	:	
	Details of CBMWTF	•	
	(i) Number of health care facilities covered by CBMWTF	4	
	(ii) No. of Beds covered by CBMWTF	:	
The state of the s	(iii) Installed treatment and disposal capacity of CBMWTF;	:	O'85 Kg/day
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	* .	OSS Kg/day
endersterings being parties surgisted and playing	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	*	Yellow Category: 712 Kg Red Category: 24Kg White: 72Kg Blue Category: 12Kg
_	Details of the Storage, Treatment, Transportation		General Solid Waste: 783/49

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		facility		Capacity:			
			and the same of th	Provision of on-site storage: (Cold storage of any other provision)			
	1	Disposal facilities	Control				
genting i more	(ii)		When we're many the property and a district of the property and the property of the property o	Type of treatment equipment	No of Units	Capacit Kg/day	
				Incinerators	Market W	1 120 004	- Community
	de la companya de la			Plasma Pyrolysis Autoclaves			
				Microwave			
				-	K	-	1
				Hydroclave	-		+
				Shredder			
	min for a distribution of the distribution of		And the second second	Needle tip cutter or destroyer	e distinction de la constitución		elike elikeranjan angela sa sek
	and the same of th		1	Sharps	1		
	and was the state of the state		and the second of the second o	Encapsulation or concrete pit	_		Proposition and Company of Contract
			Transcription (Circle)	Deep burial pits	_		
				Chemical disinfection:	-		
				Any other treatment equipment:			raf o jūju da paradas paradas projecti
	(iii)	Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum		Red Category (I	ike plasti	c, glass, e	tc.)
	(iv)	No. of Vehicles used for collection and transportation of biomedical waste	*	2	11/		
	(v)	Details of incineration ash and ETP sludge generated and disposed during the treatment of	an idea e que la companya de la comp		Quantit Genera	-	<mark>'here</mark> sposed
			Africania	Incineration	*		*
		wastes in Kg per annum	· ·	Ash			
				ETP Sludge			
	(vi)	Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of		MI Emus	m wa	ste co	meetion Ly
	(vii)	over bio-medical waste.					
	managem minutes of	you have bio-medical waste enagement committee? If yes, attach nutes of the meetings held during the porting period					

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PIN-251001



7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management	- Addition
	(ii) Number of personnel trained	2
	(iii) Number of personnel trained at the time of induction	
	(iv) Number of personnel not undergone any training so far	West of the second of the seco
	(v) Whether standard manual for training is available?	0
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	0
	(ii) Number of persons affected	0
	(iii) Remedial Action taken (Please attach details if any)	
	(iv) Any Fatality occurred, details	6
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	0
	Details of Continuous online emission monitoring systems installed	0
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	0
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the p	eriod from	
01/01/2020 10	31/12/2000	
	7	
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		Work.
		no Desperiality
	Name a	and Signature of the Head of the Institution
		171, Court Road, First Floor Above-Axis Bank, Muzaffamagar (UP.)
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Date: 6 7 21	رقور: ١١	bili-tainos
D1 A P5 1141		91.

Place: Muzaffornager