

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)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Shitanshu Bhatti
	(ii) Name of HCF or CBMWTF	:	PI INDUSTRIES LTD
	(iii) Address for Correspondence	:	Utai Sagar road, Utai pur
	(iv) Address of Facility	:	Utai Sagar road, Utai pur
	(v) Tel. No, Fax. No	:	+91 294 6651100
	(vi) E-mail ID	:	Subrata.Pal@piind.com
	(vii) URL of Website	:	www.piindustries.com
	(viii) GPS coordinates of HCF or CBMWTF	:	Not available
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) FACTORY (PRIVATE)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: Bmw/2018-19/Utaipur/Bmw/2 Dt. 17/4/18.... valid up to .life time
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/10/2022 with F(PLG) Utai pur (Girwa)/39(C1)/2015-2016/ 5055-5057
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:..NIL
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	First aid center Under factory establishment
	(iii) License number and its date of expiry	:	NA
3.	Details of CBMWTF	:	
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	NA Kg per day

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 166 gm/month Red Category : 177 gm/month White: 24 gm/month Blue Category : 89 gm/month General Solid waste: -																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	Size : NA Capacity : NA Provision of on-site storage : (cold storage or any other provision)																																																
	(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr><td>Incinerators</td><td></td><td></td><td>NA</td></tr> <tr><td>Plasma Pyrolysis</td><td></td><td></td><td>NA</td></tr> <tr><td>Autoclaves</td><td></td><td></td><td>NA</td></tr> <tr><td>Microwave</td><td></td><td></td><td>NA</td></tr> <tr><td>Hydroclave</td><td></td><td></td><td>NA</td></tr> <tr><td>Shredder</td><td></td><td></td><td>NA</td></tr> <tr><td>Needle tip cutter or destroyer</td><td></td><td></td><td>NA</td></tr> <tr><td>Sharps encapsulation or concrete pit</td><td></td><td></td><td>NA</td></tr> <tr><td>Deep burial pits:</td><td></td><td></td><td>NA</td></tr> <tr><td>Chemical disinfection:</td><td></td><td></td><td>NA</td></tr> <tr><td>Any other treatment equipment:</td><td></td><td></td><td>NA</td></tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators			NA	Plasma Pyrolysis			NA	Autoclaves			NA	Microwave			NA	Hydroclave			NA	Shredder			NA	Needle tip cutter or destroyer			NA	Sharps encapsulation or concrete pit			NA	Deep burial pits:			NA	Chemical disinfection:			NA	Any other treatment equipment:			NA
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) NA																																																
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	collection is done on every alternate day by vehicle of authorized disposal facility M/s Envision-Enviro engineers Pvt. Ltd. Udaipur																																																
	(v) Details of incineration ash and ETP sludge generated and disposed	:	<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>NA</td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed	NA																																													
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	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge	NA
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		EN-Vision Enviro Engineers Pvt. Ltd
	(vii) List of member HCF not handed over bio-medical waste.		NA
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		NA
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		once/year
	(ii) number of personnel trained		04
	(iii) number of personnel trained at the time of induction		04
	(iv) number of personnel not undergone any training so far		Nil
	(v) whether standard manual for training is available?		YES
	(vi) any other information)		-
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		NIL
	(ii) Number of the persons affected		NIL
	(iii) Remedial Action taken (Please attach details if any)		-
	(iv) Any Fatality occurred, details.		Nil
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NA
	Details of Continuous online emission monitoring systems installed		NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		All domestic liquid waste is treated in Bio ETP with activated sludge process
11	Is the disinfection method or sterilization meeting the log 4		NA

	standards? How many times you have not met the standards in a year?		NA
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) ~ NA

Certified that the above report is for the period from

..... JAN-2018 to DEC-2018

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Dr. Subrata Pal, Govt.
 Name and Signature of the Head of the Institution

Date: 27/6/19
 Place UDAIPUR