



Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Form - IV

(See rule 13)

ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30 th 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)]

Application Type: Industry

1) Particulars

i) First Name Vijaya	ii) Middle Name Lakshmi	iii) Last Name Mani
iv) Designation AVP - Regional Head Facilities	v) Aadhaar No 000000000000	vi) PAN No AAACI4798L
vii) Address as per Aadhaar Card NA	viii) Tel. No. 0203982700	ix) Fax No. 02039827000
x) e-mail vlmani@infosys.com	xi) URL of website www.infosys.com	

2) Address for Correspondence

i) Building Name/Building No./Survey Number C/o, IL Ascendas SEZ Unit, Juniper,	ii) Street / Village Rajiv Gandhi Infotech Park, Phase-III	iii) City / Taluka Hinjawadi
iv) District Pune	v) Pin-Code Number 411057	vi) Near by Landmark NA

3) Name of Industry

Infosys Limited

4) Address of Industry

i) Building Name/Building No./Survey Number Plot No. 18, C/o Ascendas IT Park	ii) Street / Village Hinjawadi PH3	iii) City / Taluka Mulshi
iv) District Pune	v) Pin-Code Number 411057	vi) Near by Landmark NA
vii) Latitude coordinate of Industry	viii) Longitude coordinate of Industry	ix) Ownership of Industry Private

5) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules

i) Authorization No. SRO-PUNE II/BMW_AUTH/173000133	ii) Authorization validity Date 2017-03-07	
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6) Status of Consents under Water Act and Air Act No	i) Consent Number Not Applicable	ii) Consent validity Date 2017-03-07
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7) Type of Health Care Facility Non-bedded hospital	i) No of Beds 2	
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8) Registration Number (e.g. Bombay Nursing Home reg. no.,MSDC,MBTC)

Not applicable

9) Registration Expiry Date

2017-03-07

10) Faculty of Medicine

7

11) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of

M/s. Passco Environmental Solution, PCMC

12) Details of BMW Generated**i) Authorized BMW Quantity MT/annum (as per valid CCA)****Yellow** 0.48000**Red** 0.06000**Blue** 0.03600**White** 0.02400**ii) Generation of BMW Quantity (kg/day)****Yellow** 0.12500**Red** 0.00360**Blue****White****iii) BMW disposed at CBMWTSDF(kg/day)****Yellow** 0.13**Red** 0.00**Blue****White****General Solid Waste****iv) Quantity of waste generated and disposed in MT/annum (on monthly average basis)****Yellow** 0.00**Red** 0.00**Blue****White****13) Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period**

Yes

14) Details trainings conducted on BMW**i) Number of trainings conducted on BMW Management.**

1

ii) Number of personnel trained

3

iii) Number of personnel trained at the time of induction

3

iv) number of personnel not undergone any training so far**v) whether standard manual for training is available?**

Yes

vi) any other information

Nil

15)Details of the accident occurred during the year**(i) Number of Accidents occurred****(ii) Number of the persons affected****(iii) Remedial Action taken (Please attach details if any)**

No

(iv) Any Fatality occurred, If yes details.

No

16) Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?**(i) Details of Continuous online emission monitoring systems installed**

No

17) Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?

Yes,

18) Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?

Yes,

19) Any air pollution control devices attached with the Incinerator No

Place	Designation	Date
Pune	AVP Regional Head Facilities	2019-06-25