

Date: 27<sup>th</sup> June 2023

To,  
Environmental Engineer  
Punjab Pollution Control Board  
Plot no- 55, Phase II  
Opposite Bassi Theater, SAS Nagar, Punjab

Sub: Annual Report for Biomedical Waste in Form IV

Dear Sir,

In reference to subject, we hereby submit the annual report for the Biomedical waste generated in the calendar year **2022 (January 2022 to December 2022)** under **Biomedical Waste Management Rules 2016**.

Attached Form IV with all details.

Thanking you,

*For Infosys Limited*



Puneet Randhawa

Sr. Regional Head- Facilities



**INFOSYS LIMITED**

Level 9 & 10, Landmark Plaza Building (F3 Tower)  
Plot No. A-40A, Phase-VIII B  
Industrial Area SAS Nagar, Mohali  
Punjab 160 059, India  
T 91 172 338 4000  
F 91 172 504 6860

Corporate Office:

CIN: L85110KA1981PLC013115  
44, Infosys Avenue  
Electronics City, Hosur Road  
Bengaluru 560 100, India  
T 91 80 2852 0261  
F 91 80 2852 0362  
askus@infosys.com  
www.infosys.com

**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 authorized person (occupier or operator of facility)   | Mr. Puneet Singh Randhawa (Regional Head-Facilities)  |
|  | (ii) Name of HCF or CBMWTF   | Infosys Limited   |
|  | (iii) Address for Correspondence   | Infosys Limited,<br>Level 9 & 10, Landmark Plaza,(F3 Tower), Plot-A-40 A, Industrial Focal Point, Phase VIII-B, Mohali-160059 |
|  | (iv) Address of Facility   | Infosys Limited,<br>Level 9 & 10, Landmark Plaza,(F3 Tower), Plot-A-40 A, Industrial Focal Point, Phase VIII-B, Mohali-160059 |
|  | (v) Tel. No, Fax. No   |   |
|  | (vi) E-mail ID   | Puneet_randhawa@infosys.com   |
|  | (vii) URL of Website   | -----   |
|  | (viii) GPS coordinates of HCF or CBMWTF  | -----   |
|  | (ix) Ownership of HCF or CBMWTF  | (State Government or Private or Semi Govt. or any other): <b>Not Applicable</b>   |
|  | (x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules   | Authorization No.:<br>BMW/Renewal/SAS/2023/21797393 dated 28/04/2023  |
| (xi). Status of Consents under Water Act and Air Act | Valid up to: <b>Not Applicable as office is on Lease</b>   |   |
| 2.   | Type of Health Care Facility   |   |
|  | (i) Bedded Hospital  | No. of Beds: <b>NIL</b>   |
|  | (ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | <b>First Aid Center</b>   |
|  | (iii) License number and its date of expiry  | <b>Not Applicable</b>   |
| 3.   | Details of CBMWTF  |   |
|  | (i) Number healthcare facilities covered by CBMWTF   | <b>Not Applicable</b>   |
|  | (ii) No of beds covered by CBMWTF  | <b>Not Applicable</b>   |
|  | (iii) Installed treatment and disposal capacity of CBMWTF:   | _____ 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)   | <b>Yellow Category :4.98 kg/annum</b>   |
|  |  | <b>Red Category :NIL</b>  |
|  |  | <b>White: NIL</b>   |
|  |  | <b>Blue Category :NIL</b>   |

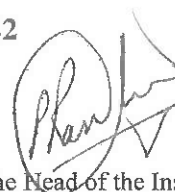


|  |   | General Solid waste: <b>3.085 kg /annum (Sanitary pads)</b><br>Biomedical waste- COVID-19 related (Masks, gloves etc.)- <b>0.24 kg/annum</b>   |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|--|---|--|-----------------------------|----------------|---|----------|------------------------------------|--|----------------------------------|--|------------------|--|--|--|------------|--|--|--|-----------|--|--|--|------------|--|--|--|----------|--|--|--|--------------------------------|--|--|--|---|--|--|--|--|--|--|--|-------------------|--|--|--|--------------------------|--|--|--|--------------------------------|--|--|--|
| 5.                                     | Details of the Storage, treatment, transportation, processing and Disposal Facility   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | (i) Details of the on-site storage facility   | <b>Size :Not Applicable</b><br><b>Capacity : Not Applicable</b><br>Provision of on-site storage : (cold storage or any other provision) <b>Not Applicable</b>  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | disposal facilities   | <table border="1"> <thead> <tr> <th>Type of treatment Equipment</th> <th>No of units</th> <th>Capacity Kg/day treated or disposed in kg per annum</th> <th>Quantity</th> </tr> </thead> <tbody> <tr> <td>Incinerators <b>Not Applicable</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td></td> <td></td> </tr> <tr> <td>-</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit -</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection: -</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | Type of treatment Equipment | No of units    | Capacity Kg/day treated or disposed in kg per annum | Quantity | Incinerators <b>Not Applicable</b> |  |                                  |  | Plasma Pyrolysis |  |  |  | Autoclaves |  |  |  | Microwave |  |  |  | Hydroclave |  |  |  | Shredder |  |  |  | Needle tip cutter or destroyer |  |  |  | - |  |  |  | Sharps encapsulation or concrete pit - |  |  |  | Deep burial pits: |  |  |  | Chemical disinfection: - |  |  |  | Any other treatment equipment: |  |  |  |
| Type of treatment Equipment            | No of units   | Capacity Kg/day treated or disposed in kg per annum  | Quantity                    |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Incinerators <b>Not Applicable</b>     |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Plasma Pyrolysis                       |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Autoclaves                             |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Microwave                              |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Hydroclave                             |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Shredder                               |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Needle tip cutter or destroyer         |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| -                                      |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Sharps encapsulation or concrete pit - |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Deep burial pits:                      |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Chemical disinfection: -               |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Any other treatment equipment:         |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.                           | Red Category (like plastic, glass etc.) <b>Not Applicable</b>  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | (iv) No of vehicles used for collection and transportation of biomedical waste  | <b>Special vehicle authorized to Rainbow Environment by PPCB being used by vendor to collect the waste</b>   |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum        | <table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>Incineration</td> <td></td> </tr> <tr> <td>Ash</td> <td></td> </tr> <tr> <td>ETP Sludge <b>Not Applicable</b></td> <td></td> </tr> </tbody> </table>   | Quantity generated          | Where disposed | Incineration  |          | Ash                                |  | ETP Sludge <b>Not Applicable</b> |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Quantity generated                     | Where disposed  |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Incineration                           |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| Ash                                    |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| ETP Sludge <b>Not Applicable</b>       |   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of                  | <b>M/s Rainbow environments Pvt Ltd</b>  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | (vii) List of member HCF not handed over Bio-medical waste.   |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| 6.                                     | Do you have bio-medical waste Management committee? If yes, attach minutes of the meetings held during the reporting period | <b>Not applicable</b>  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
|  | Details trainings conducted on BMW  |  |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |
| 7.                                     | (i) Number of trainings conducted on BMW Management.  | <b>Training is given to Ladies handling sanitary waste in the buildings regarding the usage of</b>   |                             |                |   |          |                                    |  |                                  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |  |   |  |  |  |  |  |  |  |                   |  |  |  |                          |  |  |  |                                |  |  |  |



|     |   |   |
|-----|---|---|
|     |   | <b>Gloves, mask and other PPE's while handling Sanitary waste.<br/>Training for the Biomedical waste which will be generated in Medical center will be given to the Nurses who will be in charge of the First Aid center.</b> |
|     | (ii) number of personnel trained  |   |
|     | (iii) number of personnel trained at the time of induction  |   |
|     | (iv) number of personnel not undergone any training so far  |   |
|     | (v) whether standard manual for training is available?  |   |
|     | (vi) any other information)   |   |
| 8.  | Details of the accident occurred during the year  | <b>NIL</b>  |
|     | (i) Number of Accidents occurred  |   |
|     | (ii) Number of the persons affected   |   |
|     | (iii) Remedial Action taken (Please attach details if any)  |   |
|     | (iv) Any Fatality occurred, details.  |   |
| 9.  | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?     | <b>Not Applicable</b>   |
|     | Details of Continuous online emission monitoring systems installed  | <b>Not Applicable</b>   |
| 10. | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?                   | <b>Not Applicable</b>   |
| 11. | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? | <b>Not Applicable</b>   |
| 12. | Any other relevant information  | --  |

Certified that the above report is for the period from **January 2022 to December 2022**



Name and Signature of the Head of the Institution

Date: 27<sup>th</sup> June 2023

Place: Mohali