

## 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)]

1. Particulars			
(i) Name of the authorised person (occupier or operator of facility):	Vijaya Lakshmi Mani		
(ii) Name of the HCF or CBMWTF	Not Appicable		
(iii) Address of correspondence:	Plot No. 1,Rajiv Gandhi Infotech Park,Hinjawadi,Pune-411057 near		
(iv) Address of facility:	NA, NA,NA,Pune-411057 near NA		
(v) Tel. No, FAX. No:	0203982700,		
(vi) E-mail ID:	vlmani@infosys.com		
(vii) URL Website:	www.infosys.com		
(viii) GPS coordinates of HCF or CBMWTF:	Latitude longitude		
(ix) Ownership of HCF or CBMWTF:	Private		
(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	MPCB/SROP-II/BMW-AUTH/1612000168 2019-09-30		
(xi) Status of Consents under Water Act and Air Act	Format 1.0/BO/RO-HQ/CC-1707000125 2020-02-28		
2. Type of Health Care Facility	Non Bedded Hospital		
(i) No of Beds			
(ii) License Number (e.g. Bombay Nursing Home reg. no.,MSDC,MBTC)	Not applicable		
(iii) License expiry	2019-09-30		
3. Details of CBMWTF			
(i) Number healthcare facilities covered by CBMWTF			
(ii) No of beds covered by CBMWTF			
(iii) Installed treatment and disposal capacity of CBMWTF (Kg/Day)	0		
(iv) Quantity of biomedical waste treated or disposed by CBMWTF (Kg/Day)	0 Kg/day		
(iv) Quantity of biomedical waste treated or disposed by CBMWTF	0 Kg/day		
4. Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category:14.36 Red Category:0.21 Blue Category:0.05 White Category:0.19 General Solid Waste:1.00		

(i) Details of the on-site storage facility	Size:(sqf) Capacity:(kg/day) Provision for Cold Storage:Any o	other form of S	Storage(kg/day	·)
(ii) Details of the treatment and disposal facilities	Treatment equipment	No of units	Capacity Kg/day	Quantity treated and disposed in kg/annum
	Incinerators			
	Plasma Pyrolysis			
	Autoclaves			
	Microwave			
	Hydroclave			
	Shredder			
	Needle tip cutter or destroyer	1.00		
	Sharps encapsulation or concrete pit			
	Deep burial pits			
	Chemical disinfection:	1.00		
	Any other treatment equipment:			
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum:	0			
(iv) No of vehicles used for collection and transportation of biomedical waste				
. (v) Details of incineration ash and ETPSludge generated and disposed during the treatment of waste in Kg per annum	<b>Qua</b> Incineration Ash	nity gener	ated Wher	e disposed
	ETP Sludge			
(vi) Name of the Common Bio-Medical Waste	6			

(vii) List of member HCF not handed over bio- medical waste	Document
6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes
7. Details trainings conducted on BMW	
(i) Number of trainings conducted on BMW Management.	2
(ii) Number of personnel trained.	5
(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
8.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
9.Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	Yes,
(i) Details of Continuous online emission monitoring systems installed	No
10.Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes,
11.Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	No
12.Any air pollution control devices attached with the Incinerator	No