

IL/TVM/FAC/SEZ/035/2019

14th June 2019

To,
The Environmental Engineer,
Kerala State Pollution Control Board,
Pattom,
Trivandrum – 695004.

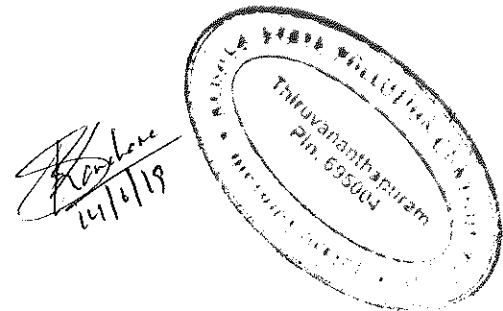
Dear Sir,

Subject: - Reg: Submission of Form IV of Bio-Medical Waste Management Rules,2016.

1. Enclosed herewith please find the subject form duly filled and complete in all respect for our offices located in Thiruvananthapuram.
2. Request acknowledge receipt.

Thanking you,
Yours Faithfully

Devi Padmanabhan Nair
Regional Manager – Facilities



RECEIVED
MAMBAKUN
24/6/19

INFOSYS LIMITED
SEZ Unit 1, Plot No. 1
Technopark Campus II
Attipra Village
Thiruvananthapuram 695 583, India
T 91 471 398 2222
F 91 471 241 6177

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

Form – IV
(See rule 13)

[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)	:	Ms. DEVI PADMANABHAN NAIR
	(ii) Name of HCF or CBMWTF	:	First Aid Centre
	(iii) Address for Correspondence	:	INFOSYS LIMITED, SEZ Unit, Technopark Campus II, Attippra Village, 695583
	(iv) Address of Facility	:	As mentioned above
	(v) Tel. No, Fax. No	:	Tele : 0471 3982222 , Fax : 2416177
	(vi) E-mail ID	:	Devi_nair01@infosys.com
	(vii) URL of Website	:	NIL
	(viii) GPS coordinates of HCF or CBMWTF	:	NIL
	(ix) Ownership of HCF or CBMWTF	:	INDIAN MEDICAL ASSOCIATION GOES ECO – FRIENDLY (IMAGE)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Consent No: PCB/TVM-DO/ICO(R)/IT/421/2016 valid up to 31.08.2019
(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31.08.2019	
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 5
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	First Aid Centre
	(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-
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	NIL
	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	68.78kg
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 66.85kg/month
			Red Category : 1.50kg/month
			White: nil
			Blue Category : 0.40gm/month
			General Solid waste: NA

5.	Details of the Storage, treatment, transportation, processing and Disposal Facility																																						
	(i) Details of the on-site storage facility	:	Size : W: 1140mm, D: 620mm, H: 850mm																																				
			Capacity : 276 Ltr, Net Weight : 55kg																																				
			Provision of on-site storage: (cold storage or any other provision) Cooler																																				
	disposal facilities		<table border="1"> <thead> <tr> <th>Type of treatment Equipment</th> <th>No of units</th> <th>Quantity Treated or Disposed in nos per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or Destroyer</td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td>-</td> <td>NA</td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td>-</td> <td>NA</td> </tr> <tr> <td>Any other treatment equipment: (Disposal & Treatment done by IMAGE)</td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment Equipment	No of units	Quantity Treated or Disposed in nos per annum	Incinerators			Plasma Pyrolysis			Autoclaves			Microwave			Hydroclave			Shredder			Needle tip cutter or Destroyer			Sharps encapsulation or concrete pit	-	NA	Deep burial pits:			Chemical disinfection:	-	NA	Any other treatment equipment: (Disposal & Treatment done by IMAGE)		
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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	:	1 (Transportation, Disposal & Treatment done by IMAGE)																																				
	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>Incineration Ash</th> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>ETP Sludge</td> <td>NIL</td> <td>NIL</td> </tr> </tbody> </table>	Incineration Ash	Quantity generated	Where disposed	ETP Sludge	NIL	NIL																														
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	vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	INDIAN MEDICAL ASSOCIATION GOES ECO-FRIENDLY (IMAGE)																																				
	vii) List of member HCF not handed over bio-medical waste.		NIL																																				
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		NIL																																				
7	Details trainings conducted on BMW																																						
	(i) Number of trainings conducted on BMW Management.		4																																				
	(ii) number of personnel trained		24																																				
	(iii) number of personnel trained at the time of induction		24																																				

	(iv) number of personnel not undergone any training so far		NA
	(v) whether standard manual for training is available?		Yes (Waste categorization and handling procedures)
	(vi) any other information)		NA
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)		NIL
	(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 (Disposal & Treatment done by IMAGE)
	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?		NA
11.	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA (Treatment done by IMAGE)
12.	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) : NIL

Certified that the above report is for the period from 1st January 2018 to 31st Dec 2018

Date:14.06.2019
Place: Trivandrum

Devi Padmanabhan Nair
Regional Manager - Facilities

