

KSPCB/BMW/ANNUAL-RETURNS/2024/04

27th June 2025

The Environmental Officer Bio Medical Waste Management Cell Karnataka State Pollution Control Board Parisara Bhavan, No.49, Church Street Bengaluru – 560001

Dear Sir/Madam,

Subject: Submission of Form 4 Annual returns regarding disposal of Biomedical waste Ref: No. KSPCB/BOM/DEO/2019-20/850 dtd. 29.07.2019

With reference to the above subject, we are hereby submitting the Biomedical Waste Annual returns for our campus located at Infosys Limited (JPIT), Plot No.23, KEONICS, Sy. No. 13,14, 17, & 18, Konappana Agrahara Village, Begur Hobli, Electronics City, Bengaluru-560100. Enclosed the copies of the form and annexure for your reference.

Yours Sincerely,

For INFOSYS LIMITED

AUTHORIZED SIGNATORY

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Enclosure:

1. Copy of Form 4

2. Copy of Biomedical Waste Authorization

3. Training Sheets & Annexure-1

CC to: The Regional Officer, Bengaluru South (Bommanahalli RO)

INFOSYS LIMITED
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)]

SI.No.	Particulars		
1.	Name of the Occupier	:	M/s Infosys Limited
	(i) Name of the authorized person	:	Mr. Sriram M D,
	(occupier or operator of facility)		Sr. Regional Manager –Facilities
	(ii) Name of HCF or CBMWTF	:	Infosys Health Care (First aid Centre only)
	(iii) Address for Correspondence	:	Plot No.44, Electronics City
			Hosur Road
			Bengaluru-560100
	(iv) Address of Facility		M/s Infosys Limited (JPIT),
			Plot No.23, KEONICS
			Sy No. 13, 14, 17 & 18, Konappana Agrahara Village
		-	Begur Hobli, Electronics City Phase -1
	(v)Tel. No, Fax. No		Bengaluru – 560100 Ph.: 080 28520261, Fax No: 080- 28520339
	(vi) E-mail ID	:	infosys@infosys.com
	(vii) URL of Website	<u> </u>	www.infosys.com
	(viii) GPS coordinates of HCF or		Latitude: 13. 0836 and Longitude: 77. 6426
	CBMWTF		Dated 10. 0000 and Dong tade. 77. 0120
	(ix) Ownership of HCF or CBMWTF	:	Private
	(x). Status of Authorization under the	:	Authorization No:
	Bio-Medical Waste (Management and		KSPCB/BOM/DEO/2019-20/850
	Handling) Rules		Dtd. 29.07.2019 – One-time approved license
	(xi). Status of Consents under Water	:	Valid up to: 30-09-2031
	Act and Air Act		
2.	Type of Health Care Facility	:	Consultation Centre (basic first aid only)
	(i) Bedded Hospital	:	No. of Beds: Nil
	(ii) Non-bedded hospital	:	-NA-
	(Clinic or Blood Bank or Clinical		
	Laboratory or Research Institute or		
	Veterinary Hospital or any other)		
	(iii) License number and its date of expiry		Reg No:
			BLU10085ALCOC
3.	Details of CBMWTF	:	Valid up to: 02.01.2030 -NA-
	(i) Number healthcare facilities	:	-NA-
	covered by CBMWTF		11/1
	(ii) No of beds covered by CBMWTF	:	-NA-
	(iii) Installed treatment and disposal	;	-NA-
	capacity of CBMWTF:		

	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	:	M/s Maridi Bio Industries Pvt. Ltd No-1/37 & 1/38, Gabbadikaval Village 35 th Mile Stone, Kanakapura Road Bengaluru-561112
	(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		Yes, attached as Annexure-1
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management.		01
	(ii) Number of personnel trained		01
	(iii) Number of personnel trained at the time of induction		NIL
	(iv) Number of personnel not undergone any training so far		NIL
	(v) Whether standard manual for training is available?		-NA-
	(vi) any other information)		
8	Details of the accidents occurred during the year		9 9
	(i) Number of Accidents occurred		0
	(ii) Number of the persons affected		0
	(iii) Remedial Action taken (Please attach details if any)		-NA-
	(iv) Any Fatality occurred, details.		0
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?		-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-
12.	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) - NA

Certified that the above report is for the period from 1st January 2024 to 31st December 2024

Date: 27-Jun-2025 Name: Mr. Sriram M D. Sr. Regional Manager - Facilities

Place: Bengaluru Signature of the Head of the Institution