



DELHI POLLUTION CONTROL COMMITTEE

(Government of N.C.T. of Delhi)

4th Floor, I.S.B.T. Building, Kashmere Gate, Delhi - 110006

Website : <http://www.dpcc.delhigovt.nic.in>

BIO MEDICAL WASTE(MANAGEMENT & HANDLING) RULES, 1998 WASTE MANAGEMENT CELL

File No. : DPCC/(11)(5)(1621)/SE-004/BMW-16

Annual Return No. DPCC/BMW/ANNUALREPORT/2018/1260
Enquiry Counter I.D. No.

FORM IV

ANNUAL REPORT

(To be submitted to the prescribed authority)

* Required Field

Date: 28-05-2018

To,

The Delhi Pollution Control Committee,
ISBT, 4th Floor, Delhi-110006
(Name of the state Govt./UT Administration)
Address.

1. Particulars of the Occupier

- | | | |
|-----|--|---|
| i | Name of the authorised person (occupier or operator of facility) | |
| | First Name * | H |
| | Middle Name | S |
| | Last Name * | MANGAT |
| ii | Name of HCF or CBMWTF * | MAX INSTITUTE OF CANCER CARE (A UNIT OF DEVKI DEVI FOUNDATION) |
| iii | Address for correspondence * | 2ND FLOOR, 26-A LAJPAT NAGAR-IV |
| | District * | SOUTH |
| | City * | New Delhi |
| | Pin Code * | 110024 |
| iv | Address of Facility | 2ND FLOOR, 26A LAJPAT NAGAR IV |
| | District * | SOUTH EAST |
| | City * | New Delhi |
| | Pin Code * | 110024 |
| v | Telephone No. | 30751000 |
| | Fax No. | |
| | Telex No. | |
| vi | Email Id * | vksapra@maxhealthcare.com |
| | Mobile No * | 9717704457 |
| | Pan No (of Income Tax Dept) of the HCU * | AAATD5283G |
| vii | URL Of Website | |

	Applicant UID No. (Adhaar No.)	946938137486
	Copy of Applicant UID (Adhaar Card)	View UId (Aadhar Card)
viii	GPS coordinates of HCF or CBMWTF	
	Latitude	
	Longitude	
ix	Ownership of HCF or CBMWTF	Any Other
x	Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	
	Authorization Status	Authorized
	Authorisation No.	DPCC/BMW/AUTH/NEWNo/2016/02296
	Valid Up to	14-06-2019
xi	Status of Consents under Water Act and Air Act	
	Authorization Status	
	Valid Up to	

2. Type of Health care Facility :

(i)	Bedded Hospital	No Of Beds 15
	Non-bedded hospital	
(ii)	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	
(iii)	License Number	1382
(iii)	License Expiry Date	31-03-2019

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:
- iv Quantity of biomedical waste treated or disposed by CBMWTF

	Category Name	Quantity (Kg/annum)
4.	Yellow	892 Kg/annum
	Red	1053 Kg/annum
	White (Translucent)	77 Kg/annum
	Blue	288 Kg/annum
	General Solid waste	939 Kg/annum
	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	

5. Details of the Storage, treatment, transportation, processing and Disposal Facility

i	Details of the on-site storage facility	Size :	25
		Capacity :	
		Provision of on-site storage	

Any other provision

ii Disposal Facilities

Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum
Incinerators			
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.)

iv No of vehicles used for collection and transportation of biomedical waste

v Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum

	Quantity generated	Where disposed
Incineration Ash		
ETP Sludge		

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

Biotic Waste Solutions Pvt Ltd

vi 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 No

7. Details trainings conducted on BMW

- i Number of trainings conducted on BMW Management.
- 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

- 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 No
- Fatality Details if any

- 9. Are you meeting the standards of air Pollution from the incinerator?**
 How many times in last year could not met the standards? Yes
 Details of Continuous online emission monitoring systems installed

- 10. Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?** Yes
 Nil

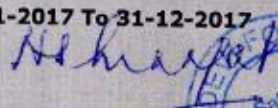
- 11. Is the disinfection method of sterilization meeting the log 4 standards? How many times you have not met the standards in a year?** Yes
 Nil

- 12. Any other relevant information**

8. Certified that the above report is for the period from 01-01-2017 To 31-12-2017

Date 28-05-2018

Place Delhi


 Name of Head Of Institution MAJ GEN (RETD) H S MANGAT
 Designation of Head Of Institution EXECUTIVE TRUSTEE