From -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 biomedical waste treatment facility (CBWTF)]

Sr.	Particulars		
No.			O STATE OF THE STA
9	Particulars of the Occupier	:	Dr. Vincel Dabey Conitte o
	(i) Name of the authorized		Vivibanund Hectical Wet.
	person (occupier or		Near mob altolta, HA Agot cather
	operator of facility)		
	(ii) Name of HCF or CBMWTF	5	Virilian and Medical met.
	(iii) Address for Correspondence	\$5 50	Mottal Holty, Noat HP Agriculton
	(iv) Address of Facility		university, Polamput
	(v) Tel. No. Fax. No.	1.	0189423602, 9816788800
	(vi) E-mail ID	1	Delampur uni @ grat l'cour
	(vii) URL of Website	12	www. unipolarget-our.
	(viii) GPS coordinates of HCF of CBMWTF		
	(ix) Ownership of HCF of	4	(State Government of Private or Semi Govt. or any
	CBMWTF		other) Toust
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handing) Rules.	3.	Valid up to Since 31 morch 2011 Pen. Aulk No - BMW/NNa/150
	(xi) Status of Consents under Water Act and Air Act.		Valid up to:
	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds
	(ii) Non-Bedded Hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	٠	
	(iii) License number and its date of expiry.	8	
	Details if CBMWTF	2	
	(i) Number healthcare facilities covered by CBMWTF	5)
	(ii) No. of beds covered by CBMWTF		100
	(iii) Installed treatment and disposal capacity of CBMWTF	:	Treatment facility of aut Sacrand Kg per day

	(iv) Quantity of biomedical waste treated or disposal by CBMWTF		Cut Source of
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)		Yellow category: 1674 331 - 33 - 37 67 6 76 9
5,	Details of the Storage , treatment, t	ransp	ortation, processing and Disposal Facility
	(i) Details of the on-site storage facility	:	Size: Capacity: Provision of on-site storage: (cold storage or any other provision) Normal Torque
	(ii) Disposal Facilities	Œ	Type of treatment No of Capacity Equipment Units Kg/day treated or disposed In Kg per
			Incinerators
			Plasma Pyrolysis Autoclaves
			LI CO
			Shredder Charles Charles
			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.) Sent To Sura Weha Leto Scuttim
	(iv) No of vehicles used for collection and transportation of biomedical waste.		
	(v) Details of incineration ash and ETP sludge generated and disposal during the treatment of wastes in Kg		Quantity Generated (Kg per Where disposed annum)
			Incineration Ash ETP Sludge
	per annum)		ETP Sludge Not Generated yet.

	(vi) Name of the Common Bio- Medical Waste Treatment	100	Suraksha Bio Santtzer Gazgol. Kangras
	Facility Operator through which wastes are disposed of		Geggol. Kangras
	(vii) List of member HCF not handed over bio-medical waste.	ä	
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period.	*	Mom attached
7.	Detail trainings conducted on BMW	:	
	(i) Number of training conducted on BMW Management.	72	8 wooght
	(ii) Number of personnel trained	*	150
	(iii) Number of personnel trained at the time of induction	(\$)	150
	(iv) Number of personnel not undergone any training so far.	ii	None
	(v) Whether standard manual for training is available?	:	Yes
	(vi) Any other information)	:	
8.	Details of the accident occurred during the year	245	
	(i) Number of Accidents occurred	*	-
	(ii) Number of the persons affected	4	
	(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?		
	Details of Continuous online emission monitoring systems installed	5	No

10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year.								
11.	It the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	:							
12.	Any other relevant information	;	1	Pollution erator.)	Control	Device	attached	with	the

Certified that the above report is for the period from January 2017 to December 2017

Date: Place: Polamper

Name and Signature of the Head of the Institution