

Annual Returns form for Health Care Facilities / Common Bio-medical Waste Treatment and Disposal Facility (CBWTF)		
PCB ID : 111143		
Health Care Facility / CBWTF Name : Arihant Hospital & RC Indore		
1	Year	2020 <input type="button" value="v"/>
2	Type of Health Care Facility	CBWTF (Common <input type="button" value="v"/>
3	Number of Beds	155
4	License Number and Date of Expiry of License	AWHB68154 28/05/2
5	Do you have Captive Treatment Facility ?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Details of CBMWTF		
6	Number healthcare facilities covered by CBWTF	
7	Coverage Area in KMS	
8	No of beds covered by CBWTF	HOS- GENERAL
9	Installed treatment and disposal capacity of CBWTF (in Kg per day)	
10	Quantity of biomedical waste treated or disposed by CBWTF (in Kg per day)	
11	Name of Cities covered by CBWTF (like Bhopal , Indore , Dewas)	
Quantity of Waste Generated or Disposed in Kg per annum (on monthly average basis)		
12	Yellow Category	8444
13	Red Category	3171



14	White Category	1170
15	Blue Category	8255
16	General Solid Waste	

Details of the Storage, Treatment, Transportation, Processing and Disposal Facility

17	Details of the on-site storage facility	COLOUR CODED BAGS HAS BEEN PROVIDED FOR DIFFERENT CATEGORY.
18	Treatment Facility	DIS.DSN.NDS
19	Quantity of Recyclable Waste sold to Authorized Recyclers after Treatment (in kg / Year)	0
20	Number of Vehicles used for Collection and Transportation of Biomedical Waste	1
21	Details of Incineration Ash and ETP Sludge generated and disposed during the Treatment of waste (in Kg / Year)	
22	Name of the Common Bio-Medical Waste Treatment Facility Operator through which waste are disposed of	NOT in Any CBWTF
23	Do you have bio-medical waste management committee ? If yes, minutes of the meetings held during the reporting period	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="text"/>

Details of Trainings conducted on Bio Medical Waste Management

24	Number of Trainings conducted on BMW Management	7
25	Number of Personnel Trained	85
26	Number of Personnel Trained at the time of Induction	
27		



	Number of Personnel not undergone any Training so far	0
28	Whether standard manual for Training is available ?	<input checked="" type="radio"/> Yes <input type="radio"/> No
29	Any other information	NA
Details of the accident occurred during the year		
30	Number of Accident occurred	0
31	Number of the persons affected	0
32	Remedial Action taken (details if any)	NA
33	Any Fatality Occurred , details	NA
34	Are you meeting the standards of air Pollution from the incinerator ? How many times in last year could not met the standards?	<input checked="" type="radio"/> Yes <input type="radio"/> No
35	Details of Continuous Online Emission Monitoring systems installed	NA
36	Liquid waste generated and treatment methods in place . How many times you have not met the standards in a year	0
37	Is the disinfection method or sterilization meeting the log 4 standards ? How many times you have not met the standards in a year ?	<input type="radio"/> Yes <input checked="" type="radio"/> No
38	Any other relevant information	
Update		



Part B. To be filled by Treatment, storage and disposal facility operators

Total quantity received -	:	N.A.
Quantity in stock at the beginning of the year		N.A.
Quantity treated		N.A.
Quantity disposed in landfills as such and after treatment		N.A.
Quantity incinerated (if applicable)		N.A.
Quantity processed other than specified above		N.A.
Quantity in storage at the end of the year		N.A.

Part C. To be filled by recyclers or co-processors or other users

Quantity of waste received during the year		N.A.
(i) domestic sources		N.A.
(ii) imported (if applicable)		N.A.
2 Quantity in stock at the beginning of the year		N.A.
3 Quantity recycled or co-processed or used		N.A.
4 Quantity of products dispatched (wherever applicable)		N.A.
5 Quantity of waste generated		N.A.
6 Quantity of waste disposed		N.A.
7 Quantity re-exported (wherever applicable)		N.A.
8 Quantity in storage at the end of the year		N.A.

Date : 27-7-2021

Signature of the Occupier or
Operator of the disposal facility