

**Form – IV**  
**(See rule13)**  
**ANNUAL REPORT**

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)]

<b>1</b>	<b>Particulars of the Occupier</b>	
i	Name of the authorised person (occupier or operator of facility)	SURESH M
ii	Name of HCF or <b>CBMWTF</b>	<b>M/s. GIPS Biotech</b>
iii	Address for Correspondence	# 1052,1 <sup>st</sup> Cross, Bhogadi 2 <sup>nd</sup> Stage North,Mysore-570026
iv	Address of Facility	Site No. 38/2 & 82, Gujje Gowdanapura Jayapura Hobli, Mysore
v	Tel. No, Fax. No	0821 4521657
vi	E-mail ID	<a href="mailto:gips.env@gmail.com">gips.env@gmail.com</a>
vii	URL of Website	<a href="http://www.gipsconsult.com">www.gipsconsult.com</a>
viii	GPS coordinates of HCF or <b>CBMWTF</b>	Latitude - 12°09'03.85" N Logitude - 76°31'00.47" E
ix	Ownership of HCF or <b>CBMWTF</b> (State Government or Private or Semi Govt. or any other)	Partnership
x	Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Valid Upto 30 <sup>th</sup> June 2021
xi	Status of Consents under Water Act and Air Act	Valid Upto 30 <sup>th</sup> June 2021
<b>2</b>	<b>Type of Health Care Facility</b>	
i	Bedded Hospital	NA
ii	Non-bedded hospital (Laboratory or Research Institute or Veterinary Hospital or any other)	NA
iii	License number and its date of expiry	NA
<b>3</b>	<b>Details of CBMWTF</b>	
i	Number healthcare facilities covered by CBMWTF	205
ii	No of beds covered by CBMWTF	506 Beds
iii	Installed treatment and disposal capacity of CBMWTF	2400 kg/day
iv	Quantity of biomedical waste treated or disposed by CBMWTF	Treated – 2885.09 kg/month Disposed - 2086.4 kg/month

<b>4</b>	<b>Quantity of waste generated or disposed in Kg per annum (on monthly average basis)</b>				
i	Yellow Category	25037.07			
ii	Red Category	34621.08			
iii	White				
iv	Blue Category				
v	General Solid waste				
<b>5</b>	<b>Details of the Storage, Treatment, Transportation, Processing and Disposal Facility</b>				
i	Details of the onsite storage facility	Its stored in designated area			
	Size	10 X 10 ft			
	Capacity	100 sq.ft			
	Provision of on-site storage : (cold storage or any other provision)				
ii	Disposal facilities	Treatment Equipment	No of units	Capacity of each unit	Quantity Treated or disposed in kg per annum
		Incinerators	1	100 kg/hr	25037.07 kg/annum
		Plasma Pyrolysis			
		Autoclaves	1	50 kg/hr	34621.08 kg/annum
		Microwave			
		Hydroclave			
		Shredder	1	50 kg/hr	34621.08 kg/annum
		Needle tip cutter or destroyer			
		Sharps encapsulation or concrete pit			
		Deep burial pits			
		Chemical disinfection		5LPH	
		Any other treatment equipment-ETP		5KLD	
iii	Quantity of recyclable wastes sold	25,000 kg / Annum			

	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	3 Nos		
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	700 kg/annum	-
		ETP Sludge	0.5 kg/day	TSDF
vi	Name of the Common Bio-Medical Waste Treatment Facility, Operator through which wastes are disposed of	M/s GIPS Biotech		
vii	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	--		
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?	As per CPCB guidelines Manual		
vi	any other information	--		
8	Details of the accident occurred during the year	None		
i	Number of Accidents occurred	None		
ii	Number of the persons affected	None		
iii	Remedial Action taken (Please attach details if any)	None		
iv	Any Fatality occurred, details	None		
9	Are you meeting the standards of air pollution from the incinerator? How many times in last year could not met the standards?	Yes  NIL		
	Details of Continuous online emission monitoring systems	Photographs enclosed as Annexure 1		

	installed	
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?	
12	Any other relevant information (Air Pollution Control Devices attached with the Incinerator)	Photographs of incinerator (having venture Scrubber) is enclosed as Annexure 2

Certified that the above report is for the period from 01.03.2016 to 31.12.2016

Name and Signature of the Head of the Institution

Date:

Place