

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)

S.N	Particulars	Details
1.	Particulars of the Occupier	
	(i) Name of the authorized person (occupier or operator of facility)	Praveen Paranjape
	(ii) Name of HCF or CBMWTF	HONDA CARS INDIA LTD.
	(iii) Address of Facility	HONDA CARS INDIA LTD. Spl-1, Tapukra Industrial Area, Khushkhera, Distt- alwar (Raj), Pin Code-301707
	(v) Tel. No, Fax. No	01493519071, Fax No-01493-522006
	(vi) E-mail ID	amittyaqi@hondacarindia.com
	(vii) URL of Website	www.hondacarindia.com
	(viii) GPS coordinates of HCF or CBMWTF	Latitude - 28° 06' 729" Longitude - 076° 48' 424"
	(ix) Ownership of HCF or CBMWTF	State Government
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Valid up to: 31.12.2023
	(xi). Status of Consents under Water Act and Air Act	Valid up to: 31.12.2023
2.	Type of Health Care Facility	
	(i) Bedded Hospital	No. of Beds: 03
	(ii) Non-bedded hospital (Clinic / Blood bank / Laboratory etc.)	Yes -OHC
	(iii) License number and its date of expiry	N.A
3.	Details of CBMWTF	
	(i) Number healthcare facilities covered by CBMWTF	One - Hoswin Incinerator
	(ii) No of beds covered by CBMWTF	3
	(iii) Installed treatment and disposal capacity of CBMWTF	N.A
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	N.A
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category : 25.655 Kg Red Category : 41.1 Kg White: Nil : 03.47 Kg Blue Category : 04.472 Kg General Solid waste : Nil
5.	(i) details of onsite storage facility	02 Days (48 Hours)
	(ii) details of treatment or disposal facility	M/s Hoswin Incinerator
	(iii) Quantity of recyclable waste sold to Authorized recyclers after treatment in Kg per annum	N.A
	(iv) No's of vehicle used for collection / transp. Bio medical waste	One
	(v) Details of incineration ash and ETP Sludge generated & Disposed	N.A
	(vi) Name of common Bio medical waste treatment facility/Operator through which waste are being disposed of	M/s Hoswin Incinerator

	(vii) list of member HCF not handed over bio medical waste	N.A
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes
7.	Details Training conducted on BMW	
	(i) Number of trainings conducted on BMW Management	12
	(ii) number of personnel trained	08 No's
	(iii) number of personnel trained at the time of Induction	08 No's
	(iv) number of personnel not undergone any training so far	Nil
	(v) Whether standard manual for training is available?	Yes (As per Act)
	(vi) any other information	No
8.	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	Nil
	(ii) Number of the persons affected	Nil
	(iii) Remedial Action taken (Please attach details if any)	N.A
	(iv) Any Fatality occurred, details	Nil
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	Yes
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a Year?	N.A
11.	Is the disinfection method or Sterilization meeting the log 4 standards? How Many Time you have not met the standards	Yes / Nil
12.	Any other relevant information	No

I, Certified that the above report is for the period from 01.01.2020 to 31.12.2020 and best of my knowledge.

Date: 14.05.2021
Place: Tapukara


(Dharamvir)
Manager