

**From IV  
(See Rule 13)  
ANNUAL REPORT**

Sl. No.	Particulars		
1	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	ANUVIND HARKAWAT
	(ii) Name of HCF or CBMWTF	:	SALES PROMOTERS
	(iii) Address for Correspondence	:	Nagar Nigam Landfill Site, Jaisalmer Road, Barli Post Office, Jodhpur-342001
	(iv) Address of Facility		Nagar Nigam Landfill Site, Jaisalmer Road, Barli Post Office, Jodhpur-342001
	(v) Tel. No, Fax. No	:	6376583508
	(vi) E-mail ID	:	sp_cbwtf_jodh@yahoo.co m
	(vii) URL of Website		
	(viii) GPS coordinates of HCF or CBMWTF		26.3027428, 72.8976945
	(ix) Ownership of HCF or CBMWTF	:	Private
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Granted and Renewal Pending
	(xi). Status of Consents under Water Act and Air Act	:	Granted and Renewal Pending
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	
	(ii) Non-bedded hospital	:	
	(iii) License number and its date of expiry		
Granted 3	Details of CBMWTF	:	
	(i) Number healthcare facilities covered by CBMWTF	:	425
	(ii) No of beds covered by CBMWTF	:	9700
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	100 Kg per/Hr
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	955.06 Kg/day
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 23188.96 kg
			Red Category : 2744.60 kg
			White Category : 1105.57 kg
			Blue Category : 2010.86 kg
			General Solid waste: Nil
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		

	(i) Details of the on-site storage :	Size :				
		Capacity :				
		Provision of on-site storage : (cold storage or any other provision) : <b>No</b>				
	(ii) Details of the treatment or disposal facilities	Type of treatment	No. of units	Capacity kg/day	Quantity treated or disposed in kag per annum	
		Incinerators:	<b>1</b>	<b>100 Kg per/Hr</b>	<b>278267.60 kg</b>	
		Plasma Pyrolysis				
		Autoclaves :	<b>1</b>	<b>40 Kg per/Cycle</b>	<b>32935.26 kg</b>	
		Microwave				
		Hydroclave				
		Shredder :	<b>1</b>	<b>40 Kg per/Hr</b>	<b>32935.26 kg</b>	
		Needle tip cutter or - destroyer				
		Sharps encapsulation or concrete pit :	<b>1</b>	<b>7x7x4</b>	<b>13266.90 kg</b>	
		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.) : <b>Nil</b>			
		(iv) No of vehicles used for collection and transportation of biomedical waste:	<b>4</b>			
		(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		<b>3075.98 kg.</b>	<b>Landfill</b>		
	ETP Sludge		Incineration			
	(vi) Name of the Common Bio - Medical Waste Treatment Facility Operator through which wastes are disposed of :	<b>M/s. Sales Promoters</b>				
	(vii) List of member HCF not handed over bio-medical waste.	<b>NA</b>				
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	<b>NA</b>				
7	Details trainings conducted on BMW	<b>NA</b>				
	(i) Number of trainings conducted on	<b>NA</b>				
	(ii) number of personnel trained	<b>NA</b>				
	(iii) number of personnel trained at the time of induction	<b>NA</b>				




	(iv) number of personnel not undergone any training so far	NA
	(v) whether standard manual for training is available?	NA
	(vi) any other information) Details of the accident occurred during the year	NA
8	(i) Number of Accidents occurred	NO
	(ii) Number of the persons affected	NO
	(iii) Remedial Action taken (Please	NO
	(iv) Any Fatality occurred, details.	NO
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	Name of Supplier : Vasthi Engineers Pvt. Ltd. Guntur, Andhra Pradesh
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	Yes
12	Any other relevant information	: (Air Pollution Control Devices attached with the Incinerator) : High Pressure wet Ventury Scrubber

Certified that the above report is for the period from 01.01.2018 To 31.12.2018

Date: 06 May, 2019

Place: Jodhpur

  
(VASANT RATHORE)  
Name and Signature of the Head of the Institution

**FORM - I**  
[ (See rule 4(o), 5(i) and 15 (2)) ]  
**ACCIDENT REPORTING**

1.	Date and time of accident :	NA
2.	Type of Accident :	NA
3.	Sequence of events leading to accident :	NA
4.	Has the Authority been informed immediately :	NA
5.	The type of waste involved in accident :	NA
6.	Assessment of the effects of the accidents on human health and the environment:	NA
7.	Emergency measures taken :	NA
8.	Steps taken to alleviate the effects of accidents :	NA
9.	Steps taken to prevent the recurrence of such an accident :	NA
10.	Does your facility have an Emergency Control policy? If yes give details:	Yes, first aid available at site, fire extinguisher available nearest CHC Fidusar Chopar 11km.

Date : 6.5.2019

Signature 

Place: Dodhpur

Designation: Project Manager