

**Form - IV**

(See rule 13)

Bio Medical Waste Annual Return for the Calender Year - 2021

Application Type: HCF	Calender Year 2021	Submit To SRO-Aurangabad I	
Member of CBMWTF: Yes			
Type of Health Care Facility Bedded			
1) Particulars			
i) First Name DR ABHAY	ii) Middle Name MADHUKAR	iii) Last Name KULKARNI	
iv) Designation DGM	v) Aadhaar No 353529790705	vi) PAN No ALEPK2767R	
vii) Address as per Aadhaar Card ANAND, 30, BHAGYA NAGAR, AURANGABAD	viii) Tel. No. 9373944430	ix) Fax No. 02406631199	
x) e-mail abhay.kulkarni@skoda-vw.co.in	xi) URL of website 00		
2) Details of Health Care Facility			
i) Name of the HCF KODA AUTO Volkswagen India Private Limited	ii) Email abhay.kulkarni@skoda-vw.co.in	iii) Name of the contact person DR.ABHAY KULKARNI	
iv) Contact No. 9373944430			
3) Address of the Health Care Facility			
i) Building Name/Building No./Survey Number ŠKODA AUTO Volkswagen India Private Limited	ii) Street / Village SHENDRA	iii) City / Taluka Aurangabad	
iv) District Aurangabad	v) Pin-Code Number 431154	vi) Near by Landmark	
vii) Latitude coordinate 00	viii) Longitude coordinate 00	ix) Ownership Private	
4) Details of valid Combined Consent and BMW Authorization (CCA)			
i) CCA / Authorization No. SRO-AURANGABAD/BMWAUTH/2005000258	ii) Valid Upto 2022-03-31		
5) Total No of Beds (As per valid Authorization)		2	
6) Registration Number (e.g. Bombay Nursing Home reg. no.,MSDC,MBTC)		323	
7) Registration Expiry Date		2021-03-31	
8) Faculty of Medicine 1			
9)Whether HCE Having Captive Treatment Facility No			
11) Details of BMW			
i) Authorized BMW Quantity MT/month (as per valid CCA)			
Yellow 0.60000	Red 0.30000	Blue 0.00000	White 0.50000

ii) Generation of BMW Quantity (kg/day)				
Yellow 0.03600	Red 0.04000	Blue 0.00000	White 0.00000	

iii) Quantity of Biomedical waste given to CBMWTDF (kg/day)				
Yellow 0.0360	Red 0.0400	Blue	White 0.0000	General Solid Waste 0.0000

12) 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?
 No

vi) any other information
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13) Details of the accident occurred during the year
i) Number of Accidents occurred

ii) Number of the persons affected

iii) Remedial Action taken (Please attach details if any)
 No

iv) Any Fatality occurred, If yes details.
 No

14) Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?
 No

15) Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?
 No

16) Whether HCE intended to Sale / Handover liquid BMW for R&D purpose
 No

Place Aurangabad	Designation DGM	Date 02-02-2022
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