

Date: 31.01.2019

To,

The Manager,

Maharashtra pollution control board

Sub-regional office- Aurangabad

Applicant: Dr. Abhay Kulkarni (Factory medical officer) - Skoda Auto India Pvt. Ltd

A-1/1, Shendra Five Star MIDC, Shendra, Aurangabad

Subject: Submission of Biomedical waste annual return

Respected sir,

This is with reference to above mentioned subject herewith we are submitting the biomedical waste annual return in Form II for the period 01.01.2018 to 31.12.2018, as we are unable to fill the annual return on web portal due to technical error on website.

Kindly consider and accept the form II for Biomedical waste annual return.

Encl.:

- Biomedical waste annual return form II for the year 2018
- 2. Authorization for Biomedical waste
- 3. Biomedical waste annual return form II for the year 2017

Yours Faithfully ay Kulkarni (Factory

Dr. Abhay Kulkarni (Factory Medical Officer) A-1/1, Shendra Five Star MIDC, Aurangabad

Contact No. 02406631180/82, 9373944430

FORM-II (See Rule-10) ANNUAL REPORT

(To be submitted to the prescribed authority by 31st January every year)

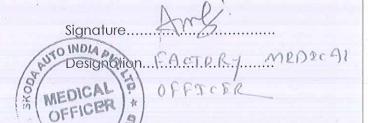
| | (to be submitted to the prescribed dufficility by 31° January every year) |
|--------|--|
| 1. 1 | Particulars of the applicant |
| (i | Name of the authorized person: DR: ABNAYXULKARAT |
| | (Occupier/operator) |
| (ii | Name of the institution :S.K.O.D.AA.H.T.O |
| | Address : A-1 1, SHEADRA FIXE STAR |
| | Tel. No. :M.D.D.C., SH.E. J.D.B.A. AYRA - 14ABAD |
| | Telex No. : 0240 - 6631180 8.2 |
| | Fax No. : 02410 - 6631199 |
| 2. | Categories of waste generated: CATEHORY 1 - 0.025 MM and quantity on a monthly average basis CATEHORY 2 - MIL |
| | CATEGORY 3- HIL CATEGORY 6-0. Sty m |
| | CATEGORY 4 - 0.25 Kg/m |
| 3. | Brief details of the treatment 5 - ATL facility In case off-site facility |
| | i) Name of the operator: MR. PRADEEP GALPHADE |
| | ii) Name and address of the: WATER BLACE PREDMETS, BIOMEDICAL facility WASTE MANAGEMENT PROTECT SURVEY HO, 122 |
| 4. | Tel. No., Telex No., Fax No.: GENEAR TAHRA PAIRRA SYENAR, Category-wise quantity of waste treated: PARTHAN RUAD ARAHABAD |
| 7. | |
| | INCINERATION BUREAL D.J Ky m |
| | THEINERATION BUREAL _ 0.3 kg/m AUTOCLAVE MECROWAVE - 0.25 kg/m |
| 5. | Mode of treatment with details: |
| | |
| fice | |
| 18, * | |
| 8. 6 | Any other information: |
| Seday. | Certified that the above report is for the period from 01. 2018 TO. |
| | |

C Board, Aura and Cer

31.12.2018

Date Att 33 03 2019

Place. A.M.A.MAASA D



MAHARASHATRA POLLUTION CONTROL BOARD SUB-REGIONAL OFFICE - AURANGABAD

Phone :

0240-2473461/63

Fax

0240-2473462

Email ; roaurangabad@mpcb.gov in

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Paryavaran Bhazan

Chikalthana Near Sem Handial Doyce Hospital

Jalna Road,

Aurangabad - 431210

LETTER OF BIO-MEDICAL WASTE AUTHORISATION

[Authorisation for Generation, Storage, Disposal of Bio-Medical Wastes under Faue 7(4)]

File number of authorisation and date of issue

SRO-AURANGABAD/ABD/BMW - AUTH/1709000540

Date: 19-09-2017

- M/s. Occupational Health Center M/s. Skoda Auto India Pvt. Etd., is hereby granted an authorisation for generation of biomedical waste on the premises situated At Plot No. A-1/1, MIDC Shendra, Aurangabad, Dist. Aurangabad.
- This authorisation shall be in force for a period up to 31.03.2020 111.

An application shall be made by the occupier/operator for renewal 3 Months Letore expiry of earlier authorisation.

- This authorisation is issued subject to compliance of the conditions stated below and to such other conditions as may be specified in the Rives for the time being in force under the Environment (Protection) Act. 1983
- No of Beds: 2

Terms and Conditions of authorisation

- 1. The authorized Person shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under
- 2. The authorisation shall be produced for inspection at the request of an officer authorized by the prescribed authority.
- 3. i) The authorized person shall not rent, lend or sell the biomedical waste or facility
 - ii) The authorized person can transfer the BMW generated at above premises to the "Transporter" or "Operator of Facility" authorized by MPCB and as Bit Medical Waste (Management and Handling) Rules, 1998 for collection, transportation, treatment in l/or disposal of BMW generated
- Any unauthorized change in equipment or working conditions as inentioned in the application by the person authorized shall constitute a breach of this authorisation
- 5. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility



11 Standards for waste autoclaving

The autoclave should be dedicated for the purposes of di-Medical Waste.

- (i) When operating a gravity flow autoclave, medical waste ship
 - (i) A temperature of not less than 121 C° and pressure of 6 inch (psi) for an autoclave residence time of not less
 - (ii) A temperature of not less than 135 C° and a pressure of residence time of not less than 45 minutes;
 - (iii) A temperature of not less than 149 C° and a pressurresidence time of not less than 30 minutes.
- (II) When operating a vacuum autoclave, medical waste minimum of one pre-vacuum pulse to purge the autoclavbe subjected to the following:
 - a temperature of not less than 121 C° and a pressurresidence time of not less than 45 minutes;
 - (ii) a temperature of not less than 135 C^o and a pressure residence time of not less than 30 minutes; or
- (III) Medical waste shall not be considered properly treated use and pressure indicators indicate that the required time were reached during the autoclave process. If for any reason pressure indicates that the required temperature, pressure not reached, the entire load of medical waste must be a proper temperature, pressure and residence time were acceptable.
- (IV) Recording of operational parameters. Each autoclascomputer recording devices which will automatically and record dates, time of day, load identification number throughout the entire length of the autoclave cycle
- (V) Validation test. Spore testing The autoclave should kill the approved biological indicator at the maximum autoclave unit. Biological indicator for autoclave shall be spores using vials or spore strips, with at least 1x 10 significant circumstances will an autoclave have minimum operational residence time of 30 minutes, regardless of temperature less than 121 C° or a pressure. Jess than 121 C° or a pressure.
- (VI) Routine Test. a chemical indicator strip/tape that the temperature is reached can be used to verify that a special achieved. It may be necessary to use more that one strip different location to ensure that the inner content adequately autoclaved.
- 12 Every Authorized Person' shall submit an Annual I authority in Form-II by 31st January every year methatic categories and quantities of BMW handled during the precion





Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

ANNUAL REPORT-FORM II

(To be submitted to the prescribed authority by 31 January every year)

- 1. Particulars of the applicant
- i) Name of the authorised person (occupier/operator)

Dr. Abhay Kulkarni

ii) Name of the Institution

Skoda Auto India Pvt. Ltd

Address

A-1/1, Shendra Five Star MIDC, Shendra, Aurangabad

Tel. No.

9373944430

Telex No.

02406631182

Fax No.

02406631199

2. Categories of waste generated and quantity on a monthly average basis

| Categories Human Anatomical Waste | Quantity 0 |
|--|---------------|
| Animal Waste | 0 |
| Microbiology & Biotechnology Waste | 0.050 |
| Waste sharps | 0.050 |
| Discarded Medicines and Cytotoxic drugs | 0.150 |
| Solid Waste | 0.150 |
| Solid Waste | 0.050 |
| Liquid Waste | 0.100 |
| Incineration Ash | 0 |
| Chemical Waste | 0 |
| Applying place of the contract | |

- 3. Brief details of the treatment facility .
- i) Name of the operator

Mr. Pradeep Galphade

ii) Name and address of the facility

Watergrace producs Biomedical waste management project Survey no 122 Gevrai Tanda Aurangabad

Tel. No.

9970067714

Telex No.

9970067714

Fax No.

4. Category-wise quantity of waste treated

Category

Quaantity