## Form - IV (See rule 13) 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)]

SI.	Particulars					
1.	Particulars of the Occupier	:				
	(i) Name of the authorised person (occupier or operator of facility)		Do. M. SHARMA			
	(ii) Name of HCF or CBMWTF	:	LIFELINE HOSPITAL			
	(iii) Address for Correspondence		C-43, SITE-CI UPSIDE, SIKANDA			
	(iv) Address of Facility		Same as above			
t	(v)Tel. No, Fax. No	:	0562-2642616, 9097046115			
1	(vi) E-mail ID	:	sharmanonvendra @yako. co.in			
Ì	(vii) URL of Website	www. Lpsagra. com - associated establishmen				
1	(viii) GPS coordinates of HCF or CBMWTF		lat : 27.20844, lag: 77.91946			
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)			
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules		Authorisation No.: 1526   AL-1144   Maked M. 19 walid up to 18.1.2626			
	(xi). Status of Consents under Water Act and Air Act	*	Valid up to:			
1	Type of Health Care Facility					
1	(i) Bedded Hospital		No. of Beds: 0			
	(ii) Non-bedded hospital  (Clinic or Blood Bank or Clinical Laboratory or					
	Research Institute or Veterinary Hospital or any other)	lin.				
	(iii) License number and its date of expiry		AL-614 validity 30.4.2020			
	Details of CBMWTF	:				
	(i) Number healthcare facilities covered by CBMWTF	:				
	(ii) No of beds covered by CBMWTF					
	(iii) Installed treatment and disposal capacity of CBMWTF:	*	Kg per day			

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	CBWTF: KLASTA NO-670, Maura Dhavera, BTMADPUR, AGRA-283202
	(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	NA
7	Details trainings conducted on BMW	Yes
	(i) Number of trainings conducted on BMW Management.	1
	(ii) number of personnel trained	5
	(iii) number of personnel trained at the time of induction	6
	(iv) number of personnel not undergone any training so far	
	(v) whether standard manual for training is available?	765
	(vi) any other information)	
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	NIL
	(ii) Number of the persons affected	None
	(iii) Remedial Action taken (Please attach details if any)	NA.
	(iv) Any Fatality occurred, details.	Mone
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	MA.
	Details of Continuous online emission monitoring systems installed	N. 4.
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	BIP CUM STP INSTALLED
11	Is the disinfection method or sterilization meeting the log 4	

	(iv) Quantity of biomedical waste treat by CBMWTF			-	Kg/day			
1.	Quantity of waste generated or dispo- annum (on monthly average basis)	sed i	in Kg per :	Red Ca White: Blue Ca	Category :	16	. 0	
	Details of the Storage, treatment, transportation, processing and Disposal Facility  (i) Details of the op-site storage is 15%							
	facility	:	Size : O Sc. Leek					
			Provision of on-site storage : (cold storage or any other provision)					
	(ii) Details of the treatment or disposal facilities		Type of to	Type of treatment equipment		acit treatedo t y r Kg/ disposed day in kg per	disposed in kg	
			Incinerato Plasma Py Autoclave Microwav Hydroclav Shredder Needle tip	rolysis s e re	0 0 10 0 0	D Sodaum Hyppoch	amum	
			destroyer Sharps encapsulat concrete p Deep buris Chemical disinfectio Any other	ion or it il pits: n:	11.00000		n Hyppochler	
S	iii) Quantity of recyclable wastes old to authorized recyclers after reatment in kg per annum.	:	Red Category		tic, glass	etc.)		
a	iv) No of vehicles used for collection and transportation of biomedical vaste			NA.				
	y) Details of incineration ash and TP sludge generated and disposed			Quan		Whe		

	standards? How many times you have not met the standards in a year?	NA.
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)

Certif	ied that the above report is for the period	I from 2018 TO 31st Dec. 2018
		dum (Dr. H. Shem)
Date:	10.22519 Agon	Name and Signature of the Head of the Institution   ETT   CE   CE   CE   CE   CE   CE   C
Place	Agai	िक्दरा, आगरा विकास स्थापन