

## Bio Medical Waste Annual Return Details

<b>Particulars of the Occupier</b>		
Particulars of the Occupier	:	
(i) Name of the authorised person (occupier or operator of facility)	:	T. Valliappan
(ii) Name of HCF or CBMWTF	:	Jamna Auto Industries
(iii) Address for Correspondence	:	Plot No. 22-25, Sengundrum Village, Melrosapuram, Singaperumal Koil Post, Chengalpattu District
(iv) Address of Facility	:	
(v) Tel. No, Fax. No	:	044-27463800
(vi) E-mail ID	:	hrchennai@jaispring.com
(vii) URL of Website	:	www.jaispring.com
(viii) GPS coordinates of HCF or CBMWTF	:	NA
(ix) Ownership of HCF or CBMWTF	:	Private
(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 21BAZ27652940 valid up to : One Time Authorisation
(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/03.2025
Type of Health Care Facility	:	Occupational Health Centre
(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)	:	
(iii) License number and its date of expiry	:	
<b>Details of CBMWTF</b>		
(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

(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day																																																
Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 3.7 Kg/Annum																																																
		Red Category : 3.88 Kg/Annum																																																
		White: 0.2 Kg/Annum																																																
		Blue Category : 0.65 Kg/Annum																																																
General Solid waste: NIL																																																		
Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
(i) Details of the on-site storage facility	:	Size :																																																
		Capacity :																																																
		Provision of on-site storage : (cold storage or any other provision)																																																
(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer		-		Sharps encapsulation or concrete pit		-		Deep burial pits:				Chemical disinfection:		-		Any other treatment equipment:			
		Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum																																													
Incinerators																																																		
Plasma Pyrolysis																																																		
Autoclaves																																																		
Microwave																																																		
Hydroclave																																																		
Shredder																																																		
Needle tip cutter or destroyer		-																																																
Sharps encapsulation or concrete pit		-																																																
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.)																																																
(iv) No of vehicles used for collection and transportation of biomedical waste	:																																																	
(v) Details of incineration ash and ETP sludge generated and disposed		<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																														
Quantity generated	Where disposed																																																	

during the treatment of wastes in Kg per annum		IncinerationAsh ETP Sludge
(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	:	G.J. Maulticlave (India) Pvt. Ltd.
(vii) List of member HCF not handed over bio-medical waste.		
Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		No
<b>Details trainings conducted on BMW</b>		
(i) Number of trainings conducted on BMW Management.		One
(ii) number of personnel trained		Two
(iii) number of personnel trained at the time of induction		Two
(iv) number of personnel not undergone any training so far		NIL
(v) whether standard manual for training is available?		Yes
(vi) any other information)		
<b>Details of the accident occurred during the year</b>		
(i) Number of Accidents occurred		NIL
(ii) Number of the persons affected		NA
(iii) Remedial Action taken (Please attach details if any)		NA
(iv) Any Fatality occurred, details.		NA
Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NIL
Details of Continuous online emission monitoring systems installed		NIL
Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NIL
Is the disinfection method or sterilization meeting the log 4		NIL

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

Certified that the above report is for the period from

.....  
.....  
.....  
.....

T. Valliappan – Plant Head  
Name and Signature of the Head of the Institution

Date: 17/06/2024  
Place: Melrosapuram

## Bio Medical Waste Annual Return Details

<b>Particulars of the Occupier</b>		
Particulars of the Occupier	:	
(i) Name of the authorised person (occupier or operator of facility)	:	Mr. Surinder Pal Singh Kohli
(ii) Name of HCF or CBMWTF	:	Non-Beded-Any-Other( Non Beded) HCF
(iii) Address for Correspondence	:	Ms. Jamna Auto Industries Limited, Jai Spring Road, Industrial Area, Yamuna Nagar, Haryana
(iv) Address of Facility	:	SF. No. 135-141, Hosur-Thally Main Road Kalugondapalli Village, Denkanikottai Taluk - 635114
(v) Tel. No, Fax. No	:	04327-233050
(vi) E-mail ID	:	safety.hosur@jaispring.com
(vii) URL of Website	:	www.jaispring.com
(viii) GPS coordinates of HCF or CBMWTF	:	NA
(ix) Ownership of HCF or CBMWTF	:	Private
(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 24BAC56422181 valid up to : One Time Authorisation
(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31 <sup>st</sup> March, 2026
Type of Health Care Facility	:	
(i) Bedded Hospital	:	No. of Beds:
(ii) Non-bedded hospital  (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	Yes
(iii) License number and its date of expiry	:	
<b>Details of CBMWTF</b>		
(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

(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day																																																
Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 1.4 Kg/Annum																																																
		Red Category : 1.6 Kg/Annum																																																
		White:																																																
		Blue Category : 0.8 Kg/Annum																																																
General Solid waste:																																																		
Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
(i) Details of the on-site storage facility	:	Size :																																																
		Capacity :																																																
		Provision of on-site storage : (cold storage or any other provision)																																																
(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>1</td> <td>-</td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td>0</td> <td>-</td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td>0</td> <td>-</td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td>0</td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators	0			Plasma Pyrolysis	0			Autoclaves	0			Microwave	0			Hydroclave	0			Shredder	0			Needle tip cutter or destroyer	1	-		Sharps encapsulation or concrete pit	0	-		Deep burial pits:	0			Chemical disinfection:	0	-		Any other treatment equipment:	0		
		Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum																																													
		Incinerators	0																																															
		Plasma Pyrolysis	0																																															
		Autoclaves	0																																															
		Microwave	0																																															
		Hydroclave	0																																															
		Shredder	0																																															
		Needle tip cutter or destroyer	1	-																																														
		Sharps encapsulation or concrete pit	0	-																																														
		Deep burial pits:	0																																															
		Chemical disinfection:	0	-																																														
		Any other treatment equipment:	0																																															
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) Nil																																																
(iv) No of vehicles used for collection and transportation of biomedical waste	:	1																																																
(v) Details of incineration ash and ETP sludge generated and disposed		<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																														
Quantity generated	Where disposed																																																	

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	:	
(vii) List of member HCF not handed over bio-medical waste.		
Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		
<b>Details trainings conducted on BMW</b>		
(i) Number of trainings conducted on BMW Management.		2
(ii) number of personnel trained		1
(iii) number of personnel trained at the time of induction		1
(iv) number of personnel not undergone any training so far		
(v) whether standard manual for training is available?		Yes
(vi) any other information)		
<b>Details of the accident occurred during the year</b>		
(i) Number of Accidents occurred		0
(ii) Number of the persons affected		0
(iii) Remedial Action taken (Please attach details if any)		0
(iv) Any Fatality occurred, details.		0
Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NIL
Details of Continuous online emission monitoring systems installed		
Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NIL
Is the disinfection method or sterilization meeting the log 4		NIL

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

Certified that the above report is for the period from

.....  
.....  
.....  
.....

Name and Signature of the Head of the Institution

Date: 7/09/2024

Place: Jamna Auto Industries, Hosur



## Bio Medical Waste Annual Return Details

<b>Particulars of the Occupier</b>		
Particulars of the Occupier	:	
(i) Name of the authorised person (occupier or operator of facility)	:	Ashok Kumar Bera Factory Manager
(ii) Name of HCF or <del>CBMWTF</del>	:	Plant Dispensary
(iii) Address for Correspondence	:	Jamna Auto Industries Ltd., 263, Vill.: Karnidih, Via Chandil, PO:Bhadudih, Dist.: Saraikela- Kharsawan, Jharkhand – 832401
(iv) Address of Facility		-Do-
(v) Tel. No, Fax. No	:	7004985027
(vi) E-mail ID	:	bera@jaispring.com
(vii) URL of Website		www.jaispring.com
(viii) GPS coordinates of HCF or <del>CBMWTF</del>		Latitude – 22.8984°N Longitude – 86.1001°E
(ix) Ownership of HCF or <del>CBMWTF</del>	:	Private
(x). Status of Authorisation under the Bio-MedicalWaste (Management and Handling) Rules	:	Authorisation No.: Applied for (Application 13425925 dt. 08.06.2022) valid up to : NA (Under Process)
(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 01/06.2025
Type of Health Care Facility	:	
(i) Bedded Hospital	:	No. of Beds: NA
(ii) Non-bedded hospital  (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	Non Bedded Plant Dispensary
(iii) License number and its date of expiry		NA
<b>Details of CBMWTF</b>		
(i) Number healthcare facilities covered by CBMWTF	:	NA
(ii) No of beds covered by CBMWTF	:	NA
(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day NA

(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____Kg/day NA																																												
Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 0.77 Kg/Annum																																												
		Red Category : 0.55 Kg/Annum																																												
		White: 0.10 Kg/Annum																																												
		Blue Category : 0.16 Kg/Annum																																												
General Solid waste: NA																																														
Details of the Storage, treatment, transportation, processing and Disposal Facility																																														
(i) Details of the on-site storage facility	:	Size :																																												
		Capacity :																																												
		Provision of on-site storage : (cold storage or any other provision)																																												
(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>NIL</td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td>NIL</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>NIL</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td>NIL</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td>NIL</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td>NIL</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>NIL</td> <td>-</td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit Deep burial pits:</td> <td>Nil</td> <td>-</td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td>NIL</td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td>NIL</td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators	NIL			Plasma Pyrolysis	NIL			Autoclaves	NIL			Microwave	NIL			Hydroclave	NIL			Shredder	NIL			Needle tip cutter or destroyer	NIL	-		Sharps encapsulation or concrete pit Deep burial pits:	Nil	-		Chemical disinfection:	NIL			Any other treatment equipment:	NIL		
		Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum																																									
		Incinerators	NIL																																											
		Plasma Pyrolysis	NIL																																											
		Autoclaves	NIL																																											
		Microwave	NIL																																											
		Hydroclave	NIL																																											
		Shredder	NIL																																											
		Needle tip cutter or destroyer	NIL	-																																										
		Sharps encapsulation or concrete pit Deep burial pits:	Nil	-																																										
Chemical disinfection:	NIL																																													
Any other treatment equipment:	NIL																																													
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) NA																																												
(iv) No of vehicles used for collection and transportation of biomedical waste	:	Through TSDF M/s. Adityapur Waste Management Pvt. Ltd.																																												
(v) Details of incineration ash and ETP sludge generated and disposed		<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																										
Quantity generated	Where disposed																																													

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	:	M/s. Adityapur Waste Management Pvt. Ltd. Plot No. 43, Khata No. 529, Dugni Mouza, Dist: Saraikela-Kharsawan, Jharkhand - 833220
(vii) List of member HCF not handed over bio-medical waste.		NA
Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		NA
<b>Details trainings conducted on BMW</b>		
(i) Number of trainings conducted on BMW Management.		1
(ii) number of personnel trained		3
(iii) number of personnel trained at the time of induction		3
(iv) number of personnel not undergone any training so far		Bio Medical Waste Management Rules, 2016 id referred for training
(v) whether standard manual for training is available?		Job specific training is provide to individuals
(vi) any other information)		
<b>Details of the accident occurred during the year</b>		
(i) Number of Accidents occurred		NIL
(ii) Number of the persons affected		NIL
(iii) Remedial Action taken (Please attach details if any)		NA
(iv) Any Fatality occurred, details.		NA
Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NA
Details of Continuous online emission monitoring systems installed		NA
Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NA
Is the disinfection method or sterilization meeting the log 4		Yes

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

Certified that the above report is for the period from

.....  
.....  
.....  
.....

Ashok Kumar Bera  
Factory Manager  
Name and Signature of the Head of the Institution

Date: 16/05/2024  
Place: Jamshedpur

## Bio Medical Waste Annual Return Details

<b>Particulars of the Occupier</b>		
Particulars of the Occupier	:	Jamna Auto Industries Ltd., Malanpur
(i) Name of the authorised person (occupier or operator of facility)	:	NMQ. Shamsi
(ii) Name of HCF or CBMWTF	:	J.R.R. Waste Management Pvt. Ltd., Agra
(iii) Address for Correspondence	:	22, 23 Industrial Area, Malanpur (Bhind) M.P.
(iv) Address of Facility	:	
(v) Tel. No, Fax. No	:	9897030999
(vi) E-mail ID	:	<a href="mailto:jrrwmp@gmail.com">jrrwmp@gmail.com</a>
(vii) URL of Website	:	<a href="http://www.jaispring.com">www.jaispring.com</a>
(viii) GPS coordinates of HCF or CBMWTF	:	NA
(ix) Ownership of HCF or CBMWTF	:	Private
(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: AWH8 - 57976 valid up to : 29/02/2028
(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 29/02/2028
Type of Health Care Facility	:	
(i) Bedded Hospital	:	No. of Beds: 01
(ii) Non-bedded hospital  (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	NA
(iii) License number and its date of expiry	:	
<b>Details of CBMWTF</b>		
(i) Number healthcare facilities covered by CBMWTF	:	
(ii) No of beds covered by CBMWTF	:	
(iii) Installed treatment and disposal capacity of CBMWTF:	:	<u>3200</u> Kg per day

(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day																																																
Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 20 Kg/Annum, 1.66 KG Monthly																																																
		Red Category : -																																																
		White: -																																																
		Blue Category :																																																
General Solid waste:																																																		
Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
(i) Details of the on-site storage facility	:	Size :																																																
		Capacity :																																																
		Provision of on-site storage : (cold storage or any other provision)																																																
(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>√</td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td>×</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>×</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td>×</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td>×</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>√</td> <td>-</td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td>×</td> <td>-</td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td>×</td> <td>-</td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td>×</td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment: Autoclave</td> <td>√</td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators	√			Plasma Pyrolysis	×			Autoclaves	×			Microwave	×			Hydroclave	×			Shredder				Needle tip cutter or destroyer	√	-		Sharps encapsulation or concrete pit	×	-		Deep burial pits:	×	-		Chemical disinfection:	×			Any other treatment equipment: Autoclave	√		
		Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum																																													
		Incinerators	√																																															
		Plasma Pyrolysis	×																																															
		Autoclaves	×																																															
		Microwave	×																																															
		Hydroclave	×																																															
		Shredder																																																
		Needle tip cutter or destroyer	√	-																																														
		Sharps encapsulation or concrete pit	×	-																																														
Deep burial pits:	×	-																																																
Chemical disinfection:	×																																																	
Any other treatment equipment: Autoclave	√																																																	
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) NA																																																
(iv) No of vehicles used for collection and transportation of biomedical waste	:	One																																																
(v) Details of incineration ash and ETP sludge generated and disposed		<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																														
Quantity generated	Where disposed																																																	

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	:	J.R.R. Waste Management Pvt. Ltd.
(vii) List of member HCF not handed over bio-medical waste.		-
Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		-
<b>Details trainings conducted on BMW</b>		
(i) Number of trainings conducted on BMW Management.		02
(ii) number of personnel trained		17
(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?		
(vi) any other information)		
<b>Details of the accident occurred during the year</b>		
(i) Number of Accidents occurred		NIL
(ii) Number of the persons affected		-
(iii) Remedial Action taken (Please attach details if any)		-
(iv) Any Fatality occurred, details.		
Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NA
Details of Continuous online emission monitoring systems installed		NA
Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NA
Is the disinfection method or sterilization meeting the log 4		NA

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

Certified that the above report is for the period from 01.04.2023 – 31.3.2024

.....  
.....  
.....  
.....

**NMQ Shamsi**  
**GM (HR & Admn)**  
Name and Signature of the Head of the Institution

Date: 06/06/2024  
Place: Malanpur



## Bio Medical Waste Annual Return Details

Application Id: 76955890

<b>Particulars of the Occupier</b>		
Annula Report submit for the year	:	2023
(i) Name of the authorised person (occupier or operator of facility)	:	Dheeraj Kumar
(ii) Name of HCF or CBMWTF	:	Jamna Auto Industries (Dispensary)
(iii) Address for Correspondence	:	Jai Spring Road, Industrial Area, Yamunanagar
(iv) Address of Facility	:	Jai Spring Road, Industrial Area, Yamunanagar
(v) Tel. No, Fax. No	:	7082001801
(vi) E-mail ID	:	Amarjit.singh@jaispring.com
(vii) URL of Website	:	
(viii) GPS coordinates of HCF or CBMWTF	:	
(ix) Ownership of HCF or CBMWTF	:	Private
(x). Status of Authorisation under the Bio-MedicalWaste (Management and Handling) Rules	:	Authorisation No.: BMW23YAM51314908 valid up to : 31/03/2027
(xi). Status of Consents under Water Act and Air Act	:	
HCF/CBMWTF type	:	HCF
(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)	:	0
(iii) License number and its date of expiry	:	License No.: 51314908 Expiry: 31/03/2027
<b>Details of CBMWTF</b>		
(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

(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day																																																
Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 1 Kg/Annum																																																
		Red Category : 1 Kg/Annum																																																
		White: 0 Kg/Annum																																																
		Blue Category : 0 Kg/Annum																																																
General Solid waste: 0 Kg/Annum																																																		
Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
(i) Details of the on-site storage facility	:	Size :																																																
		Capacity :																																																
		Provision of on-site storage : (cold storage or any other provision)																																																
(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer		-		Sharps encapsulation or concrete pit		-		Deep burial pits:				Chemical disinfection:		-		Any other treatment equipment:			
		Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum																																													
Incinerators																																																		
Plasma Pyrolysis																																																		
Autoclaves																																																		
Microwave																																																		
Hydroclave																																																		
Shredder																																																		
Needle tip cutter or destroyer		-																																																
Sharps encapsulation or concrete pit		-																																																
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.) 1																																																
(iv) No of vehicles used for collection and transportation of biomedical waste	:	1																																																
(v) Details of incineration ash and ETP sludge generated and disposed		<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																														
Quantity generated	Where disposed																																																	

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	:	
(vii) List of member HCF not handed over bio-medical waste.		
Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		No
<b>Details trainings conducted on BMW</b>		
(i) Number of trainings conducted on BMW Management.		1
(ii) number of personnel trained		1
(iii) number of personnel trained at the time of induction		1
(iv) number of personnel not undergone any training so far		0
(v) whether standard manual for training is available?		Yes
(vi) any other information)		NA
<b>Details of the accident occurred during the year</b>		
(i) Number of Accidents occurred		0
(ii) Number of the persons affected		0
(iii) Remedial Action taken (Please attach details if any)		NA
(iv) Any Fatality occurred, details.		NA
Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NA
Details of Continuous online emission monitoring systems installed		NA
Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		0
Is the disinfection method or sterilization meeting the log 4		Yes meeting all the standards of disinfection

standards? How many times you have not met the standards in a year?		
Any other relevant information	:	NA