

JKPW/MED/35/2017

June 28, 2017

**Mr. P. K. Kar, Regional officer,
State Pollution Control Board, Odisha
Kasturinagar, Rayagada-765001**

Sub: Annual Return for Bio-Medical Waste (Management & Handling) Rules 1998 & Amended June-2000.

Your Ref: Authorization No-1544/SPCB/Authorization (Bio Medical Waste), IND-V-BW-32/07, Dated 26.04.2016

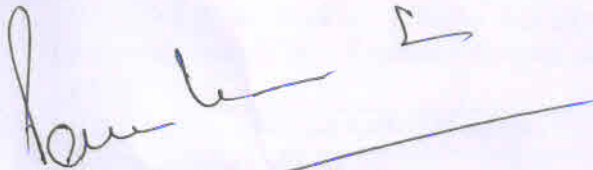
Dear Sir,

We are herewith submitting the annual Return in Form IV (Rule 13) for the period Jan-2016 to Dec-2016.

Thanking You.

Your's Faithfully

For JK Paper Limited



Executive Vice President (Works)

Encl: Form IV *28/6/17*

Copy to: The Member Secretary, State Pollution Control Board, Paribesh Bhawan, A/118, Nilakanthanagar, Unit-viii, Bhubaneswar-12.

Form - IV
(See rule 13)
ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th 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)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Pavan Kumar Sur?
	(ii) Name of HCF or CBMWTF	:	J.K.P.M. Dispensary
	(iii) Address for Correspondence	:	J.K. Paper Ltd J.K. Pur
	(iv) Address of Facility	:	Rayagoda, Odisha-765017
	(v) Tel. No, Fax. No	:	(06856) 233550
	(vi) E-mail ID	:	smohanty@jkpm.jkmail.com
	(vii) URL of Website	:	JKPaper.com
	(viii) GPS coordinates of HCF or CBMWTF	:	—
	(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.: 1544/SPCB/Authorization IND-V-BW-32/07 valid up to 31-03-2019
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31-03-2018
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:..... Nil
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	OPD with clinical Laboratory
	(iii) License number and its date of expiry	:	1544/SPCB/Authorization IND-V-BW-32/07 31-03-2019
3.	Details of CBMWTF	:	NA
	(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

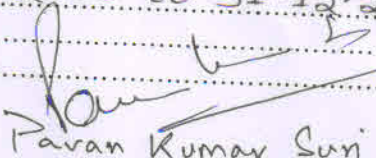
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF :	_____ Kg/day			
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) :	Yellow Category : Nil			
		Red Category : 7.17Kg			
		White: 5.82Kg			
		Blue Category : 5.65Kg			
		General Solid waste: 107.6kg			
5	Details of the Storage, treatment, transportation, processing and Disposal Facility				
	(i) Details of the on-site storage facility :	Size : 30 m ²			
		Capacity : 6.2 m ³			
		Provision of on-site storage : (cold storage or any other provision)			
	(ii) Details of the treatment or disposal facilities :	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum
		Incinerators	Nil	-	-
		Plasma Pyrolysis	Nil	-	-
		Autoclaves	1	20kg	7.17Kg
		Microwave	Nil	-	-
		Hydroclave	Nil	-	-
		Shredder	Nil	-	-
		Needle tip cutter or destroyer	2	-	400gm
		Sharps encapsulation or concrete pit	1	-	5.82kg
		Deep burial pits:	2	50kg	7.17 kg
		Chemical disinfection:	1	-	-
		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 :	1			
	(v) Details of incineration ash and ETP sludge generated and disposed :	Quantity generated	Where disposed		

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge	} Nil
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	NA	
	(vii) List of member HCF not handed over bio-medical waste.	NA	
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes	
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.	2	
	(ii) number of personnel trained	9	
	(iii) number of personnel trained at the time of induction	5	
	(iv) number of personnel not undergone any training so far	Nil	
	(v) whether standard manual for training is available?	Yes	
	(vi) any other information)	Nil	
8	Details of the accident occurred during the year	Nil	
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.		
9.	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	
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Nil	
11	Is the disinfection method or sterilization meeting the log 4	Yes	

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

Certified that the above report is for the period from

..... 01.01.2016 to 31.12.2016


 Pavan Kumar Suni
 Name and Signature of the Head of the Institution

Date: 28.6.2017
 Place JAYKAYPUR