

**FORM - IV**  
(See rule 13)  
**ANNUAL REPORT**  
**(Period from 01.01.2023 to 31.12.2023)**

[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)]

**1. Particulars of the Occupier**

(i) Name of the authorized person (Occupier of facility.	]	Parry Agro Industries Limited, Mango Range Garden Hospital.
(ii) Name of the HCR or CBMWTF	]	Kovai Bio-Waste Management (P) Limited, 4 <sup>th</sup> Floor, Ramani's Fraser Square, Near Old Flyover, Goodshed Road, Coimbatore - 641 001.
(iii) Address for correspondence	]	Parry Agro Industries Limited, Mango Range Garden Hospital, Mango Range Post - 643 220, Pandalur [Taluk], The Nilgiris Dist.
(iv) Address of Facility	]	-do-
(v) Tel.No. Fax No	]	Hospital Mobile No. 75983-73524
(vi) E-Mail ID	]	mrggh@pai.murugappa.com
(vii) GPS coordinates of HCF	]	-
(viii) Ownership of HCF	]	Parry Agro Industries Limited.
(x) Status of Authorization under Bio-Medical Waste (Management and Handling) Rules	]	BMW Authorization No. 19BAD23929276 dt.01.05.2019. Valid upto 31.03.2025.
(xi) Status of Consents under Water Act and Air Act	]	Air Consent No. 1909223928707 dated. 26.04.2019 (Valid upto 31.03.2025).  Water Consent No. 1909123928707 Dated.26.04.2019 (Valid upto 31.03.2025).

**2. Type of Health Care Facility**

(i) Bedded Hospital	]	Bedded Hospital.
(ii) Non-bedded Hospital	]	-

3. Details of CBMWTF

(i) Number of Health Care Facilities covered by CBMWTF	]	N.A
(ii) No. of beds covered by CBMWTF	]	N.A
(iii) Installed treatment and disposal capacity Of CBMWTF	]	N.A
(iv) Quantity of bio-medical waste treated or Disposed by CBMWT	]	N.A

4.Quantity of Waste generated or disposed in Kg per annum (or monthly average basis)	]	Yellow Category	:	7.4 Kgs.
		Red Category	:	15.8 Kg
		White	:	
		Blue Category	:	10.2Kgs.
		General Solid Waste	:	

5.Details of the Storage, treatment, transportation, Processing and Disposal Facility.

(i) Details of the on-site storage facility	]	Size	:	N.A.
		Capacity	:	N.A.
(ii) Disposal Facilities				

Type of Treatment equipment	No. of units	Capacity Kg/day	Qty.treated or disposed in kg/per annum
Incinerators	N.A	N.A	N.A
Plasma Pyrolysis	N.A	N.A	N.A
Autoclave	N.A	N.A	N.A
Microwave	N.A	N.A	N.A
Hydroclave	N.A	N.A	N.A
Shredder	N.A	N.A	N.A
Needle tip cutter or destroyer	N.A	N.A	N.A
Sharps	N.A	N.A	N.A
Encapsulation or concrete pit	N.A	N.A	N.A
Deep burial pits	N.A	N.A	N.A
Chemical disinfection	N.A	N.A	N.A
Any other treatment equipment	N.A	N.A	N.A

(iii)Quantity of recyclable wastes sold to Authorized recyclers after treatment in kg Per annum.	]	N.A.
(iv)No. of vehicles used for collection and Transportation of bio-medical waste.	]	N.A.
(v)Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum.	]	N.A.
(vi)Name of the common Bio-Medical Waste Treatment Facility Operator through which Wastes are disposed of.	]	Kovai Biowaste Management [P] Limited, 4 <sup>th</sup> Floor, Ramani;s Fraser Square, Near Old Flyover, Goodshed Road, Coimbatore - 641 001.
(vii)List of members HCF not handed over Bio-medical waste.	]	N.A.
6. Do you have bio-medical waste management committee? If yes, attach minutes of the meeting held during the reporting year.	]	-
7. Details Training conducted on BMW		
(i)Number of trainings conducted on BMW Management.	]	4
(ii)Number of personnel trained	]	11 Nos.
(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?	]	Yes
8. Details of the accident occurred during the year		
(i)Number of Accidents occurred	]	Nil
(ii)Number of the persons affected	]	Nil
(iii)Remedial Action taken (Please attach details If any)	]	Nil

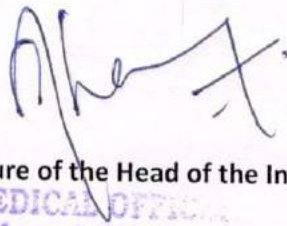
9. Are you meeting the standards of Air Pollution from the incinerator? How many times in last year could not met the standards? ] N.A.
10. Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? ] N.A.
11. Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? ] Yes, met standards.
12. Any other relevant information ] (Air Pollution Control Devices Attached with the Incinerator)  
N.A.

Certified that the above report is for the period from 01.01.2023 to 31.12.2023

Date : 09.01.24

Place : Mango Range Garden Hospital.

Name and Signature of the Head of the Institution.

  
MEDICAL OFFICER  
Parry Agro Industries Ltd  
Mangorange Hospital  
Mangorange PO-643226,