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)

S	Particulars				
No.					
1	Particulars of the Occupier	:			
	i) Name of the authorised person	:	New Medical Centre		
	(Occupier or operator of facility)		470, M.G.Road, Pondicher	ry 605 001	
	ii) Name of HCF or CBMWTF	• •			
	iii) Address for correspondence		470, M.G.Road, Pondicherry 605 001		
	iv) Address of Facility	:			
	v) Tel. No., Fax No.	:	0413-2261200 (100 lines)		
	vi) Email ID		newmedicalcentre@gmail.com		
	vii) URL of Website	:	www.nmcpondy.com		
	viii) Ownership of HCF or CBMWTF	• •	Private		
	ix) Status of Authorisation under the Bio	:	Authorisation No.:		
	Medical Waste (Management and		25/PPCC/BMW/AUTHO/JSA(PPCC)/2018/338	
	Handling) Rules		Valid upto: 30/11/2020		
	x) Status of Consent under Water Act	:	Valid		
	and Air Act				
2	Type of Health Care Facility	:	Hospital		
	i) Bedded Hospital	:	37 Beds		
	ii) Non-bedded Hospital (Clinic or Blood				
	Bank or Clinical Laboratory or	:			
	Research Institute or Veterinary				
	Hospital or any other)		3463500300 VALID UPTO 20	/02/2021	
3	iii) License number and its date of expiry	:			
3	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow category Red category	7200 Kgs per annum 3500 Kgs per annum	
	per annum (on monumy average basis)		White category	730 Kgs per annum	
			Blue category	360 Kgs per annum	
			General Solid Waste	300 Kgs per annum	
4	Details of the Storage, treatment, transportation	. pr			
· ·	i) Name of the Common Bio Medical	, ۲'	Pondicherry Solidwaste Management Company P		
	Waste Treatment facility operator	:	Ltd		
	through which wastes are disposed		Rajiv Gandhi Land Mark, R	.S.No.79/5 & 80/2	
	off		Thuthipet village, Villianur (
				,	
5	Do you have bio medical waste management				
	committee? If yes, attach minutes of the	:	Yes		
	meetings held during the reporting period				

6	Details of training conducted on BMW	:	
	i) Number of trainings conducted on	:	One
	BMW Management		
	ii) Number of persons trained	:	Two
	iii) Number of personnel trained at the	:	Two
	time of induction		
	iv) Number of personnel not undergone	:	Nil
	any training so far		
	 v) Whether standard manual for training 	:	Yes
	is available		
	vi) Any other information	:	Nil
7	Details of the accident occurred during the		
	year		Nil
	 i) Number of accidents occurred 	:	NA
	ii) Number of persons affected	:	NA
	iii) Remedial action taken (Please attach	:	NA
	details if any)		
	iv) Any fatality occurred, details	:	NA
8	Liquid waste generated and treatment		
	methods in place. How many times you have	:	Nil
	not met the standards in a year		

Certified that the above report is for the period from 1st January 2019 to 31st December 2019

Date: 16/07/2020 Place: Pondicherry

Sd/- T.Nalini Managing Director Name and Signature of the Head of Institution