

To:

Date: 29-06-2020

The Environmental Officer - City ~~West~~ *Bommalahalli*
Karnataka State Pollution control Board
Nisarga Bhavan, 1st Floor, Thimmaiah road,
7th D Cross, shivanagar, opp, Pushpanjali Theatre,
Shivanagar, Bangalore-560010

Sir,

*Sub: Submission of BMW Annual returns Statement vide Form -IV for the
Year 2019*

With reference to the above subject, please find enclosed copy of the BMW Annual returns Statement furnished for the year 2019 as per Rule 13 of the BMW Act 2019.

Kindly acknowledge of the above and oblige.

Thanking you,

Yours truly

For Kids Clinic India Pvt Ltd


Authorized Signatory



Encl: BMW Annual returns Statement



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	:	Kids clinic India PVT LTD
	(i) Name of the authorised person (occupier or : operator of facility)	:	Hanumantagouda
	(ii) Name of HCF or CBMWTF	:	cloud Nine Hospital Bellandur
	(iii) Address for Correspondence	:	#177/4 Bellandur village Varthur Hol Bengaluru East Taluk
	(iv) Address of Facility	:	—————
	(v) Tel. No, Fax. No	:	1860500 9999
	(vi) E-mail ID	:	hanumantagouda.b@cloudninecare.com
	(vii) URL of Website	:	www.cloudninecare.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) <input checked="" type="checkbox"/>
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation PCB/SEO/BMC No. SCW HCF/REG. (No. 122.407/16/17 LD)valid up to 30/09/2021
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 16/01/2022
2.	Type of Health Care Facility	:	Private
	(i) Bedded Hospital	:	No. of Beds: 35
	(ii) Non-bedded hospital	:	



	Laborator (Clinic or Blood Bank or Clinical y or Research Institute or Veterinary Hospital or any other)												
	(iii) License number and its date of expiry												
3.	Details of CBMWTF	:											
	(i) Number healthcare facilities covered by CBMWTF	:	Maradi										
	(ii) No of beds covered by CBMWTF	:	35										
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	NA Kg per day										
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	NA Kg/day										
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	<table border="1"> <tr> <td>Yellow Category</td> <td>8416 Kg</td> </tr> <tr> <td>Red Category :</td> <td>4584 Kg</td> </tr> <tr> <td>White:</td> <td>129 Kg</td> </tr> <tr> <td>Blue Category :</td> <td>1040 Kg</td> </tr> <tr> <td>General Solid waste:</td> <td>25800 Kg</td> </tr> </table>	Yellow Category	8416 Kg	Red Category :	4584 Kg	White:	129 Kg	Blue Category :	1040 Kg	General Solid waste:	25800 Kg
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5	Details of the Storage, treatment, transportation, processing and Disposal Facility												
	(i) Details of the on-site storage facility	:	<table border="1"> <tr> <td>Size :</td> <td>7x4 - FT 7x4 - FT</td> </tr> <tr> <td>Capacity :</td> <td>300 Kg</td> </tr> <tr> <td>Provision of on-site storage any other provision) Yes (normal)</td> <td>:(cold storage or</td> </tr> </table>	Size :	7x4 - FT 7x4 - FT	Capacity :	300 Kg	Provision of on-site storage any other provision) Yes (normal)	:(cold storage or				
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disposal facilities		<table border="0"> <tr> <td>Type of treatment equipment</td> <td>No of units</td> <td>Capacity Kg/day</td> <td>Quantity treated or disposed in kg per annum</td> </tr> <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>— 2</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>— 1</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>— 0</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>— 2</td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td>— 0</td> <td></td> <td></td> </tr> </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	— 2			Microwave	— 0			Hydroclave	— 0			Shredder	— 1			Needle tip cutter or destroyer	— 0			Sharps encapsulation or concrete pit	— 0			Deep burial pits:	— 0			Chemical disinfection:	— 2			Any other treatment equipment:	— 0		
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(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	:	01 comes from Karachi 1 vehicle																																																
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		<table border="0"> <tr> <td></td> <td>Quantity generated</td> <td>Where disposed</td> </tr> <tr> <td>Incineration Ash</td> <td>— NA</td> <td>NA</td> </tr> <tr> <td>ETP Sludge</td> <td>NA</td> <td>NA</td> </tr> </table>		Quantity generated	Where disposed	Incineration Ash	— NA	NA	ETP Sludge	NA	NA																																							
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(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.		4																																																
6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		NO																																																
7 Details trainings conducted on BMW		YES																																																
(i) Number of trainings conducted on BMW Management.		10 Monthly 2 times																																																

	(ii) number of personnel trained	25
	(iii) number of personnel trained at the time of induction	25
	(iv) number of personnel not undergone any training so far	-
	(v) whether standard manual for training is available?	Yes
	(vi) any other information	
8	Details of the accident occurred during the year	- NA -
	(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?	Implemented ETP
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
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

January - 2019 to December - 2019

Name and Signature of the Head of the Institution

Date: 29/6/2020
Place: Bangalore

