

Form - IV (See rule 13) Bio Medical Waste Annual Return for the Calender Year - 2020 **Calender Year** Submit To **Application Type:** Industry 2020 SRO-Nashik 1) Particulars ii) Middle Name i) First Name iii) Last Name Krishna Samadhan Wargat iv) Designation v) Aadhaar No vi) PAN No Senior General Manager -XXXXXXXXXX05 XXXXXXXX7N Manufacturing vii) Address as per Aadhaar Card viii) Tel. No. ix) Fax No. Maharashtra 7738362207 xi) URL of website x) e-mail Krishna.Wargat@diageo.com www.diageo.com 2) Details of the Industry i) Name of the Industry ii) Email iii) Name of the contact person Zarana Patel United Spirit Zarana.Patel@diageo.com iv) Contact No. 7575062227 3) Address of the Industry ii) Street / Village i) Building Name/Building iii) City / Taluka No./Survey Number Dindori Nashik Unit 1, Parmori Village iv) District v) Pin-Code Number vi) Near by Landmark Nashik 422202 vii) Latitude coordinate viii) Longitude coordinate ix) Ownership 20.20865 73.67081 Private 4) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules ii) Authorization validity Date i) Authorization No. MPCB-BMW AUTH-0000026361 2023-01-27 5) Status of Consents under Water Act and Air Act i)Consent Number ii)Consent validity Date 0000029442/R/CAC-1805000295 2022-08-31 6) Total No of Beds (As per valid Authorization) 7) Registration Number (e.g. Bombay Nursing Home reg. no., MSDC, MBTC) 1907000900 2021-08-01 8) Registration Expiry Date 9) Faculty of Medicine occupational therapy 10) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of M/s. Water Grace Products, Nashik Yellow 1.00000 Blue White 1.00000

Red

11) Details of BMW i) Authorized BMW Quantity MT/month (as per valid CCA)	

Yellow 0.01950 ii) Bio Medical Waste Generated (Kg/day)		Red	В	lue	White		
Yellow 0 0195 iii) Quantity of Biomedical wa	Red aste given to C	Blue BMWTDF (kg/			General Solid Waste		
12) Details trainings conducted on BMW							
i) Number of trainings conducted on BMW Management. ii) Number of personnel trained 12							
iii) Number of personnel trained at the time of induction 8							
iv) number of personnel not undergone any training so far v) whether standard manual for training is available? Yes							
vi) any other information NA							
13) Details of the accident occurred during the year i) Number of Accidents occurred							
ii) Number of the persons affected							
iii) Remedial Action taken (Please attach details if any) No							
iv) Any Fatality occurred, If yes details. No							
14) Liquid waste generated a year? No	and treatment i	methods in pla	ce. How man	y times you have n	ot met the standards in a		
15) Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? $$ No							
Place Nashik	Designat EHS Assis	tion sstant Manager		Date 29-06-2021			