

Date : 5 -03-2018

To,

The Regional Officer  
Rajasthan State Pollution Control Board,  
Near F.C.I. Godown, Chanderia.  
Chittorgarh (Raj.)

Subject :- Annual Report.

Dear Sir,

Ref to authorization letters no BMW/2017-18/Chittorgarh/BMW/3.  
F(BMW)chittorgarh(Nimbahera)/1643(1)/2017-2018/785-786 Dated 31-07-2017  
Enclosed here with kindly find Annual Report in form no-1V (see rule 13) for the  
period 1<sup>st</sup> Jan 2017 to 31<sup>st</sup> Dec 2017 of Hospital Wonder Cement Ltd., R.K. Nagar  
Nimbahera.

We have C.B.M.W. Treatment facility through M/S EN VISION ENVIRO ENGINEERS  
(P) Ltd. Udaipur our membership code is CH 0029

Thanking You

Faithfully Yours  
Dr. Vishwas Jain  
Dy. Chief Medical Officer  
Wonder Cement Ltd.  
R.K. Nagar, Nimbahera 312501  
Dist. Chittorgarh (Raj.)  
Dr. Vishwas Jain  
Dy. Chief Medical Officer

## Form - 1V

(See - Rule 13)

## ANNUAL- REPORT YEAR 2017

(To be submitted to the prescribed authority by 30<sup>th</sup> June every year)

S. N	Particulars		
1	Particulars of the Occupier		
	(i) Name of Authorized Person (Occupier/Operator)	:	DR. VISHWAS JAIN
	(ii) Name of the HCF	:	Hospital Wonder Cement Ltd
	(iii) Address for correspondence	:	Wonder Cement Ltd., R. K. Nagar, Nimbahera, Distt - Chittorgarh (Raj.)
	(iv) Address of Facility	-	Same as above
	(v) Tel No. Fax No.	-	01477 - 307591, 01477-307333
	(vi) E-Mail ID		vishwas.jain@wondercement.com
	(vii) URL of Website		http://www.wondercement.com/energy-report
	(viii) GPS coordinates of HCF		Under Process
	(ix) Ownership of HCF		Private
	(x) Status of Authorization under the Bio Medical Waste ( Management & Handling ) Rules		Authorization letter no BMW/2017-18/Chittorgarh/BMW/3. F(BMW)chittorgarh(Nimbahera)/1643(1)/2017-2018/785-786 Dated 31-07-2017 Valid up To 31.07.2022
(xi) Status of consent under Water Act & Air Act		Valid Up to 31.07.2022	
2	Type of Health Care Facility		
	(i) Bedded Hospital		10 Bedded
3	Details of CBMWTF		We have started common BMW treatment facility from Envision Enviro Engineer (P) Ltd. Udaipur (Membership Code . CH0029 )
4	Quantity of Waste generate in Kg per annum		Yellow Category 51 KG 500 Grams
			Red Category 29 KG 100 Grams
			White Category 4 KG 580 Grams
			Blue Category 5 KG 640 Grams
			General Solid waste 40KG 50 Grams

Dr. Vishwas Jain  
 Dy. Chief Medical Officer  
 W. K. Nagar, Nimbahera  
 R.K. Nagar, Nimbahera 332601  
 Distt. Chittorgarh (Raj.)

5	Details of Storage, Treatment, Transportation, Processing & Disposal Facility	
	(i) Details of on-site storage facility	As Per Schedule 1
	Details of on-site Disposal facility	N.A
	(iii) Quantity of recyclable wastes	Red category 29 Kg
	(iv) No of vehicle used for collection & Transport	N.A
	(v) Details of incineration waste	N.A
	(vi) Name of C.B.M.W.T.F Operator	Envision Enviro Engineers (P) Ltd 128/103 1st floor, Samruddhi Complex opp. Krishi mandi, Rati Stand Udaipur (Raj.) Ph. 0294- 2481513
6	Do You have Bio Medical waste management committee	No
7	Details Training conducted on BMW	
	(i) No. of training conducted on BMW	One
	(ii) No of Person trained	Nine
	(iii) No of Person trained at time of induction	Nine
	(iv) No of person not undergone training so far	Nil
	(v) Whether standard manual for training available	N.A
	(vi) Any other Information	N.A
8	Details of the accident occurred during the year	
	(i) No of accident occurred	Nil
	(ii) No of Persons affected	Nil
	(iii) Remedial action taken	N.A
	(iv) Any fatality occurred	Nil
9	Are you Meeting the standards of Air Pollution from incinerators	N.A
10	Liquid waste generated & treatment method in place. How many times you have not met the standards in a year	88 liters Dispose after chemical treatment. Nil
11	Is the disinfection method or Sterilization meeting the log 4 standard	N.A
12	Any other information	Nil

Certified that the above information is the period for 1<sup>st</sup> Jan-2017 to 31<sup>st</sup> Dec-2017.

Date : 05.03.2018

Place

Nimbahera

Dr. Vichayee Jain  
Signature  
R.K. Designation  
128/103  
128/103

**FORM I**

{(see Rule 4(0), 5(i) & 15 (2))}

**ACCIDENT REPORTING**

1. Date and time of accident : Not applicable
2. Type of Accident : Not applicable
3. Sequence of events leading to accident : Not applicable
4. Has authority been informed immediately: N.A
5. The type of waste involved in accident : N.A
6. Assessment of the effects of the accidents on human health and the environment: N.A
7. Emergency measures taken : N.A
8. Steps taken to alleviate the effects of accidents : N.A
9. Steps taken to prevent the recurrence of such an accident : N.A
10. Does your facility has an Emergency Control policy ? If yes give Details N.A

Date : 5/3/18

Place: wa  
Nimbahere

Signature .....  
Designation .....  
Dr. Vikram Singh  
District Officer  
R.K. Nagar,  
Dist. Chitambar (M.S.)

Date 5/3/18

# ACCIDENT RECORD

During Bio Medical waste Handling

Duration..... 1.1.2017 to 31.12.2017

S.N	Month	No of Accident	Details
1	JANUARY	Nil	/
2	FEBRUARY	Nil	
3	MARCH	Nil	
4	APRIL	Nil	
5	MAY	Nil	
6	JUNE	Nil	
7	JULY	Nil	
8	AUGUST	Nil	
9	SEPTEMBER	Nil	
10	OCTOBER	Nil	
11	NOVEMBER	Nil	
12	DECEMBER	Nil	
Total		Nil	

Dr. Vishwanath Jain  
District Officer  
R.K. Dist. 2601  
Dr. Vishwanath Jain