

Form - IV (See rule 13) Bio Medical Waste Annual Return for the Calender Year - 2022 **Application Type: Industry** Calender Year Submit To 2022 SRO-Raigad I 1) Particulars ii) Middle Name i) First Name iii) Last Name Dineshpratap Rajbahadur Singh vi) PAN No v) Aadhaar No iv) Designation **Executive Vice President-Operations** 00000000000 000000000 vii) Address as per Aadhaar Card viii) Tel. No. ix) Fax No. E-503 OM Harmony, Plot No.267, Near 7304873694 Bank of India, Sector 10, Kharghar, Raighad, Maharashatra-410 210 x) e-mail xi) URL of website dineshpratap.singh@dfpcl.com www.dfpcl.com 2) Details of the Industry i) Name of the Industry ii) Email iii) Name of the contact person Deepak Fertilisers And Petrochemicals deepak.pande@dfpcl.com Deepak Pande Corporation Limited iv) Contact No. 9920942161 3) Address of the Industry i) Building Name/Building ii) Street / Village iii) City / Taluka No./Survey Number MIDC, Taloja. Panvel Plot Nos.K-1, Part-1, K-2, K-3, K-4, K-5 & K-6 iv) District v) Pin-Code Number vi) Near by Landmark Raigad 410208 vii) Latitude coordinate viii) Longitude coordinate ix) Ownership 19.06 Private **Details of valid Combined Consent and BMW Authorization (CCA)** i)Authorization No. ii)Authorization validity Date Format 1.0/CAC/UAN Mar 31 2026 12:00:00:AM No.00000808011/CR-2108001156, Dated 20.08.2021 5) Status of Consents under Water Act and Air Act i)Consent Number ii)Consent validity Date Format 1.0/CAC/UAN Mar 31 2026 12:00:00:AM No.00000808011/CR-2108001156, Dated 20.08.2021 6) Total No of Beds (As per valid Authorization) 7) Registration Number (e.g. Bombay Nursing Home reg. no., MSDC, MBTC) Factory License no.10025104 Dec 31 2026 12:00:00:AM 8) Registration Expiry Date 9) Faculty of Medicine Medical 10) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of

M/s.Mumbai Waste Management Ltd., Taloja

| .1) Details of BMW) Authorized BMW Quantity K | g/month (as per | valid CCA) | | | | | |
|--|---------------------------------------|---------------------------|----------------------|---------------|-------------------------|--------|--|
| Yellow 20.00000 | Red 5.00000 | | Blue 20.00000 | | White 5.00000 | | |
| i) Bio Medical Waste Generate | ed (Kg/month) | | | 1 | | | |
| Yellow 17.90000 | | Red 1.70000 | | Blue | White | White | |
| i) Quantity of Biomedical was | te given to CBM | IWTDF (kg/Month) | | | | | |
| Yellow 17.9000 | Red 1.700 | | 0 Blue White | | eral Solid Waste | | |
| 2) Details trainings conducte Number of trainings conduct | | nagement. | | | | | |
|) Number of personnel traine | d | | | | | | |
| i) Number of personnel traine /) number of personnel not un) whether standard manual for es i) any other information A 3) Details of the accident occurre Number of Accidents occurre | ndergone any tr or training is ava | aining so far ailable? | | | | | |
| Number of the persons affe | cted | | | | | | |
| i) Remedial Action taken (Ple | ase attach deta | ils if any) | | | | | |
|) Any Fatality occurred, If ye | s details. | | | | | | |
| 4) Liquid waste generated an o | d treatment me | thods in place. Ho | w many times you | u have not me | t the standards in a ye | ar? | |
| 5) Is the disinfection method year? 0 | or sterilization | meeting the log 4 | standards? How r | many times yo | u have not met the sta | ndards | |
| 7) Whether HCE intended to 9 | Sale / Handover | liquid BMW for R& | D purpose | | | | |
| Place | Designa | ation | | Date | | | |