

BEFORE THE NATIONAL GREEN TRIBUNAL

(EASTERN ZONE BENCH, KOLKATA)

O.A. NO. ²³⁹ of 2024/EZB

ORIGINAL APPLICATION

under National Green Tribunal Act' 2010

In the matter of:

Subhas Datta

.....Applicant

-Versus-

State of West Bengal and Others

.....Respondents

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Applicant

Subhas Datta

SUBHAS DATTA

Office: 25/1, Guitendal Lane, Howrah-711 101'

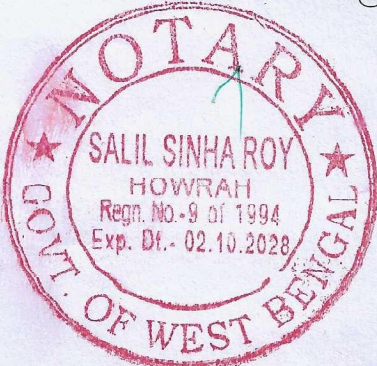
Residence: 55/2, Panchanantala Road,

P.O.+P.S.+Dist. - Howrah-711 101(for both)

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SYNOPSIS OF THE CASE

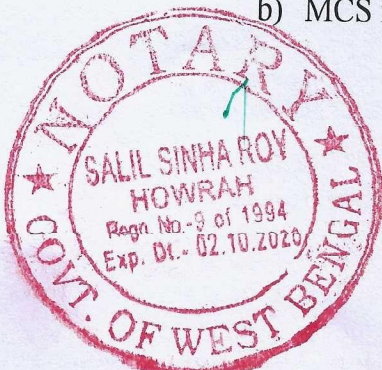
Mismanagement of Bio-Medical Wastes in the State of West Bengal has now become a direct threat and danger to the environment and health of the people at large. Various reports and documents generated officially by the State Pollution Control Board and Comptroller and Auditor General (CAG) indicate the dismal position in this regard. The Annual Report of the State Pollution Control Board for the year 2023, as submitted to the Central Pollution Control Board is indicative of the situation that there is a gap between Bio-Medical Wastes generated and disposed. The brief of the Report is reproduced below:-

Description

I Bedded Hospitals and Nursing Homes (bedded)	3209 Nos
II Clinics, dispensaries	6718 “
III Total No of Beds	1,68,323 “
IV Quantity of Bio-medical wasted generations (kg, day)	43120.87 kgs
V Bio-medical waste generation by bedded hospital (kg, day)	35603.29 kgs
VI Bio-medical waste generation by non-bedded hospital (kg day)	7517.58 kgs
VII Bio-medical waste treatment and disposal (kg day)	43120.87 kgs

That other than the indoor bedded hospitals various types of health services are rendered to the people as follows :-

- a) OPD in the Hospitals.
- b) MCS in the Hospitals.



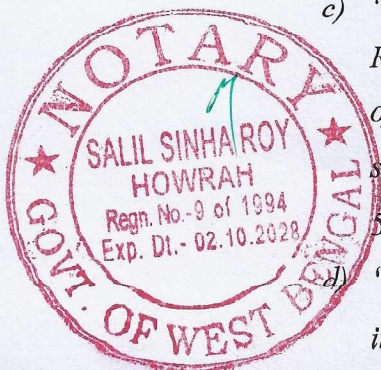
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- c) Mobile Medical Camps.
- d) Blood Banks totalling 106 (State Govt. 58, Private 31 and Central Govt. 17)
- e) Mobile Blood collections centres.
- f) Diagnostic Centers in the State (total number 1521)
- g) Veterinary Hospitals (total number 3372 as per CAG Report No. 1 of 2020)
- h) Various Health Research Institutions
- i) AYUSH Hospitals

The actual Bio-Medical Wastes, generated is stated to be much more than the quantity as shown by the State Pollution Control Board in the Annual Report. The CAG has also reported in its latest Report for April 2013 to 2018, vide Report No. 1 of 2020 in this regard which is alarming. The brief of certain observations is as under :-

- a) *"In the Annual Report of 2016, WBPCB understated the quantity of BMW generation (26,859 kg per day) to match the figure of BMW shown as treated (26,859 kg per day) by the CBMWTFs so that no BMW was shown as remaining un-treated in the State. WBPCB was intentionally understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal."*
- b) *"An Audit analysis of the extent of understatement using average BMW generation figure of 0.231 kg per bed per day showed that BMW generation was understated atleast by 49.52 percent What appeared to be even more worrisome was that the WBPCB was intentional understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal."*
- c) *"The issue of improper segregation of BMW was pointed out in the Audit Report of the Comptroller and Auditor General of India on Government of West Bengal for the year ended 31 March 2008. Even after 10 years, serious irregularities were observed by Audit in segregation of BMW in 52 (74.29 per-cent) of the 70 test-checked HCFs."*
- d) *"Veterinary and other waste remained un-treated in the State. There was irregular burning and disposal in unauthorised burial pits."*

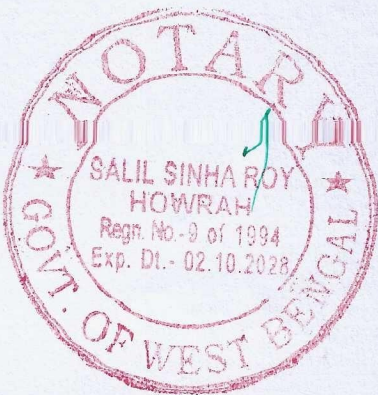


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There are media reports in this regard that such wastes ^{go} to the gray market. Moreover, the practice of segregation of Bio-Medical Wastes from other general wastes of the Health Centers is not followed properly. This situation is very alarming and a matter of concern in the arena of environment and health. The concerned authorities are negligent about this aspect for which the kind intervention of the Hon'ble Tribunal has become necessary. Hence this Application

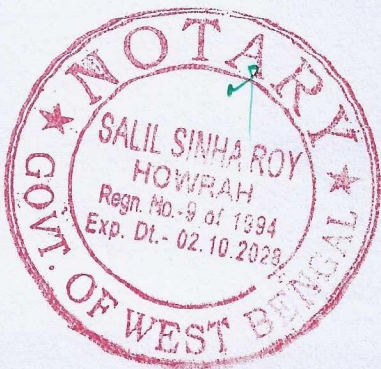


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LIST OF DATES

Sl No.	Dates	Particulars
1.	February 1998	Applicant has been appointed as Amicus Curiae by the High Court in the matter of wrong disposal of Bio-Medical Wastes.
2.	11.05.2024	The applicant had visited Malbazar Super facility Hospital to vouch the position of Bio-Medical Wastes mixed with other wastes.
3.	24.07.2024	West Bengal Pollution Control Board submitted the Annual Report on Bio-Medical Wastes to Central Pollution Control Board.
4.	2020	Comptroller and Auditor General of India Report on West Bengal Bio-Medical Wastes.
5.	14.11.2024	Memorandum sent to the Respondents on Bio-Medical Wastes.



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**BEFORE THE NATIONAL GREEN TRIBUNAL
(EASTERN ZONE BENCH, KOLKATA)**

O.A. NO. of 2024/EZB

ORIGINAL APPLICATION

under National Green Tribunal Act' 2010

In the matter of;

Subhas Datta

.....Applicant

-Versus-

State of West Bengal and Others

.....Respondents

IN THE MATTER OF:

1. Subhas Datta

Son of Late Baneswar Datta,

25/1, Guitendal Lane,

P.O. + P.S. + District – Howrah

Pin code – 711101, West Bengal

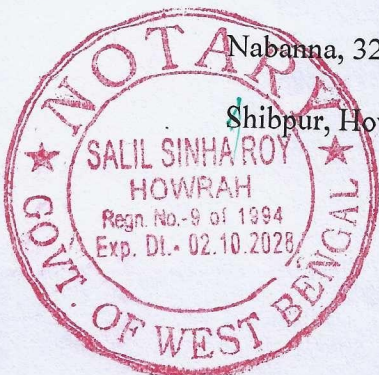
..... Applicant

1. STATE OF WEST BENGAL,

(Notice through the Chief Secretary),

Nabanna, 325, Sarat Chatterjee Road,

Shibpur, Howrah - 711102



Tel -033-22535130

cs-westbengal@nic.in

2. DEPARTMENT OF HEALTH & FAMILY WELFARE,

(Notice through the Principal Secretary),

Govt. of West Bengal,

Swasthya Bhavan, GN 29, Sector V,

Salt Lake, Calcutta – 700091

Tel – 033-23330403

prin.secy.wbhealth@gmail.com

3. DEPARTMENT OF PUBLIC HEALTH & ENGINEERING,

(Notice through the Principal Secretary),

Govt. of West Bengal,

NIJALAY, Janaswastha Karigari Bhawan,

Plot No. CN 8, Block CN, Street No. 18,

Sector V, Calcutta – 700091

Tel – 033-22143695

secy@wbphed.gov.in

4. DEPARTMENT OF ENVIRONMENT,

(Notice through the Principal Secretary),

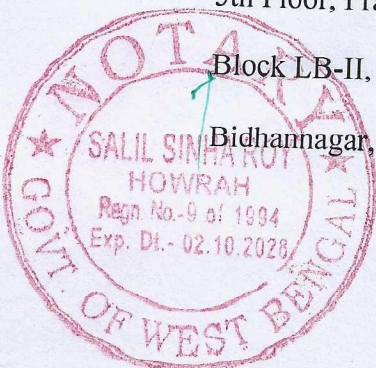
Govt. of West Bengal,

Environment Department,

5th Floor, Pranisampad Bhawan,

Block LB-II, Slat Lake, Sec-III,

Bidhamnagar, Kolkata - 700 106



09 DEC 2024

Tel-033-2335-2742

psecy.env-wb@gov.in

5. WEST BENGAL POLLUTION CONTROL BOARD

(Notice through the Member Secretary),

Paribesh Bhawan, 10A Block L.A, Sec-III,

Salt Lake, Bidhannagar, Kolkata - 700106

Tel-0332335-8213

net.wbpcb-wb@bangla.gov.in.

6. DEPARTMENT OF ANIMAL RESOURCES DEVELOPMENT,

(Notice through the Additional Chief Secretary),

Govt of West Bengal.

Prani Sampad Bhawan, LB 21, Sector – III,

Salt Lake, Calcutta – 700106

Tel – 033-23351152

secy.ard-wb@nic.in

7. CENTRAL POLLUTION CONTROL BOARD,

(Notice through the Member Secretary),

Parivesh Bhawan, East Arjun Nagar,

Delhi – 110032

Tel -011-22303655

mascb.cpcb@nic.in

..... Respondents



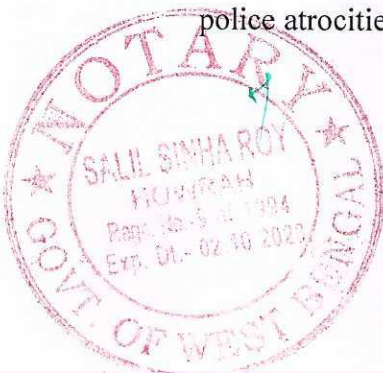
- A. The address of the Applicant as given above is for the service of notices of this application and that of their representatives.
- B. The addresses and e-mail details of the respondents as given above are for service of notices of this application and that of their representatives.
- C. The Applicant named above begs to present this application on the inappropriate disposal of Bio-Medical Wastes by not observing the guidelines as prescribed by the Central Pollution Control Board for handling, treatment and disposal of waste generated, which is creating severe environmental, health hazards and other types of disorders in the State of West Bengal. It is matter of real concern that such wastes cater the gray market, which create health problems to the people.

Most Respectfully Sheweth

I, Subhas Datta, aged about 75 years, son of Late Baneswar Datta, by Religion – Hindu, occupation Chartered Accountant, residing at 25/1, Guitendal Lane, P.S+P.O+Dist. - Howrah, Pincode-711101, do hereby solemnly declare and say as follows:-

FACTS IN BRIEF:

1. That the applicant is the environmental activist and public spirited person. He is engaged in different social, environmental and philanthropic activities since 1977. The applicant is second to none in the fields of ventilating the grievances of the common people. There is hardly any major public issue in the State of West Bengal on which the applicant has not tried to project the peoples' demands before different appropriate authorities.
2. That the applicant has organized series of movements on ecology, environment and on different social aspects of the State of West Bengal. Some of such activities had to face police atrocities, arrests and institution of false and fabricated criminal proceedings against



the applicant. On the basis of the Writ Petition (No. 380 of 1995) filed by the applicant in April 1995 before the Hon'ble Supreme Court of India the first Environment Bench, which is popularly called as the Green Bench, had been constituted in the High Court at Calcutta in June 1996.

3. That various activities of the applicant have been recognized by several media giants during the past few decades, brief of which is as follows: -

a) Times of India, the leading English daily had projected the applicant as the "Hero of the Country" in the year 2007.

b) India Today, the prestigious English Weekly had recognized the applicant as one of the "fifty pioneers of the country" and published a special edition on 7th July 2008, detailing the activities undertaken by him.

c) Hindusthan Times, the leading English daily had recognized the applicant in 2012 as one of the "25 change makers of the country" and given felicitation.

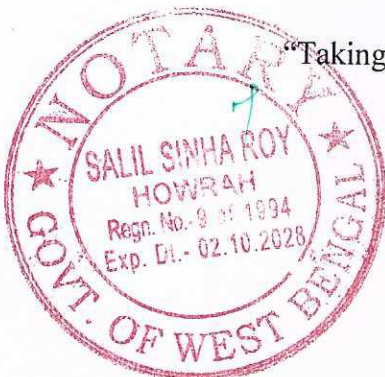
d) Times of India, the English daily, had nominated the applicant as "Hero of Calcutta - 2013."

e) The Telegraph, one leading English daily published from Calcutta and National Insurance Company had given "True Legends Award 2018" to the applicant.

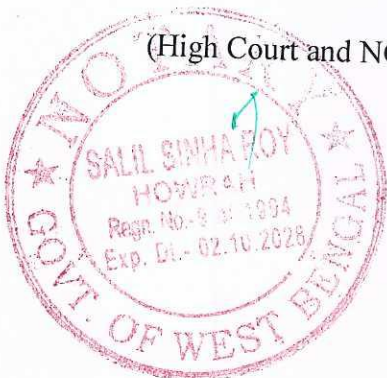
4. That several other forms of recognitions have been given to the applicant from time to time, the brief of some of which is as follows:

a) Research work had been carried out by one German Scholar covering the applicant's activities in 2000, which was afterwards published as book titled

"Taking the State to Court" by the Oxford University Press, London.



- b) European Green Party leaders had invited the applicant in 2009 to Brussels, Belgium to discuss the possibility of forming Green Party in India. Meeting had been held with U. K. Green Party leader in London in 2009.
- c) In order to adopt the same practices for Ganga cleaning the applicant had participated in Thames River cleaning operation in London, organized by Thames 21, in 2005.
- d) Several weeklies in different languages have published articles on the applicant's activities during the last few decades.
- e) He had visited London/Glasgow in 2013 and met the respective port authorities to ascertain the methodology of dredging by saving the marine bio-diversity for adopting the same process by the Calcutta Port Trust.
- f) There are about thirteen thousand newspaper clippings on various news covering the activities of the applicant carried out during the last more than three decades.
5. That during the past forty years the applicant has been continuously fighting hard to save and protect the environment and ecology of the State of West Bengal and some of the Eastern and North Eastern States of the country. The applicant has brought about one hundred and thirty environmental matters and also various matters of public interest before the Hon'ble Apex Court of the Country, Environment Bench (Green Bench) and Public Interest Litigation Bench of the High Court at Calcutta, National Green Tribunal and also have been interacting on various related issues and assisting/assisted the Hon'ble Courts (High Court and NGT) as Amicus Curiae in some matters.



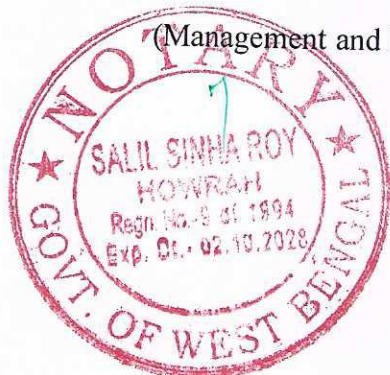
6. That few of the moves of the applicant have been recognized otherwise by and or before the Judicial forum, the brief of which is as follows:-

a) On the basis of the pleadings/petition before the High Court at Calcutta The West Bengal Trees (Protection and Conservation in Non-Forest Areas) Act 2006 was enacted.

b) Based on his petition before the High Court, Calcutta, compensation under The Public Liability Insurance Act 1994 had been awarded to the victims of air pollution caused by a reputed industrial house for the first time in the country.

c) Six Supreme Court Judges from Thailand came to Calcutta and had interactive sessions with the applicant where the Consulate General of US had also been present. The Hon'ble Judges had visited the High Court at Calcutta to view/hear proceedings and the arguments made by him before the Public Interest Litigation Bench of the High Court at Calcutta.

7. That the applicant has been working since long on the bio-medical waste issues. Even before the Bio- Medical Rules was framed, the applicant had been appointed as Amicus Curiae in W.P. No. 5803(w) of 1998, sou motu taken-up by the Hon'ble High Court, Calcutta on hazards being caused through the unplanned and unscientific process of disposal of clinical waste at Calcutta and Howrah. Since then the applicant had the occasions of visiting different dumping grounds of Calcutta, Howrah, Diamond Harbour, Burdwan, Siliguri, Bolpur, Darjeeling where initially the bio-medical wastes used to be dumped along with the regular solid wastes. At present all the Health Care Facility (HCF) Centres in the State of West Bengal are covered under the Bio-Medical Wastes (Management and Handling) Rules 1998. It has been painfully observed that the mandated



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Rules and procedures on collection, segregation, processing, treatment and especially disposal of such wastes are not being followed appropriately. Such lapses are causing serious health and environmental disorders.

8. That on 11th May 2024 while visiting North Bengal the applicant had gone to Malbazar town in Jalpaiguri district where it had been observed that in the backyard of Malbazar Super facility Hospital bio-medical wastes and the other general wastes of the hospital were dumped together. The applicant had interacted with different doctors/staffs of the hospital and brought this aspect to their attention when immediate action was promised by them. The applicant has taken some photographs of such situation of the backyard of the said hospital showing mixed position of the general and bio-medical wastes, which are enclosed and marked as Annexure – P/1
9. That from the Annual Report on Bio-Medical Wastes Management for the year 2023 (submitted by the State Pollution Control Board to the Central Pollution Control Board, vide Memo No. 262/18-74/2001 (Pt-IX), dated 24.07.2024, the following details have been gathered:-

Description

I Bedded Hospitals and Nursing Homes (bedded)	3209 Nos
II Clinics, dispensaries	6718 “
Total Non-bedded units	
III Total No of Beds	1,68,323 “
IV Quantity of Bio-medical wasted generations (kg, day)	43120.87 kgs
V Bio-medical waste generation by bedded hospital	35603.29 kgs



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(kg, day)

VI Bio-medical waste generation by non-bedded hospital (kg day) 7517.58 kgs

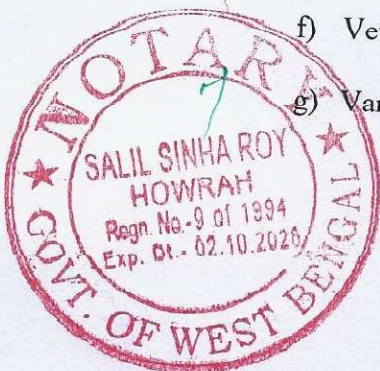
VII Bio-medical waste treatment and disposal (kg day) 43120.87 kgs

The photocopy of the relevant pages of the Annual Report of West Bengal Pollution Control Board is enclosed and marked as Annexure – P/2.

10. That in the Govt. hospitals/health centers in order to cope with the emergency situations, in the General Wards of such hospitals more than one patient are accommodated on a single bed. Thus the total number of admitted patients become much more than the total no of beds shown in such health organizations with the possibility of enhanced quantity of per bed bio-medical wastes.

11. That other than the hospitals, various types of health service facilities are provided to the people both by the State and as well as by private segments requiring indoor bed facilities generating bio-medical wastes. Other types of health service centers, which generate Bio-Medical Wastes are the as follows:-

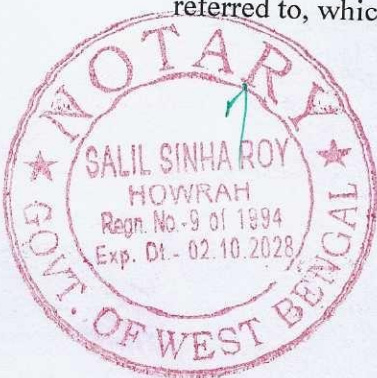
- a) OPD in the Hospitals.
- b) MCS in the Hospitals.
- c) Mobile Medical Camps.
- d) Blood Banks totalling 106 (State Govt. 58, Private 31 and Central Govt. 17)
- e) Diagnostic Centers in the State (total number 1521)
- f) Veterinary Hospitals (total number 3372 as per CAG Report No. 1 of 2020)
- g) Various Health Research Institutions



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h) AYUSH Hospitals

12. That other than in-door health services, the out-door health services of various nature also generate huge quantity of Bio-Medical Wastes. Thus it is expected that the generation of bio-medical wastes per day will be much more than the generation and disposal as found and submitted by the State Pollution Control Board to the Central Pollution Control Board. It is, strongly apprehended that the gap in the generations and disposal of bio-medical waste will be huge, which finally finds its way to the gray-market. This situation is a matter of serious health hazards to the people at large. This application wants to focus on the gap between the actual generation of bio-medical wastes and ultimate disposal of the same.
13. That there are several newspaper reports stating that the substantial part of bio-medical wastes goes to the gray market and huge financial deals are behind such under the carpet operations. Such media reports are concerning to one State managed Medical College Hospital of the State, which indicates that see-deep corruption is involved in the whole process concerning all the health establishments of the State. The applicant prefers to enclose two such newspaper clippings of Anandabazar Patrika in Bengali, dated 28.08.2024 and 04.09.2024 respectively with its translation into English, done through Google Lens, which are enclosed and collectively marked as Annexure – P/3.
14. That with regard to the gap between the generation and disposal of Biomedical wastes, the Report of the Comptroller and Auditor General of India (CAG) on General and Social Sector for the years April 2013 to March 2018, Government of West Bengal, Report No. 1 of 2020 (as available from the “public domain”), the Executive Summary, page 10), may be referred to, which states as follows:-



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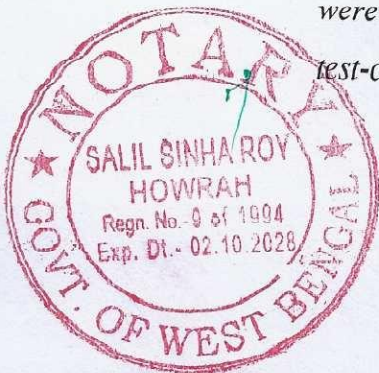
“In the Annual Report of 2016, WBPCB understated the quantity of BMW generation (26,859 kg per day) to match the figure of BMW shown as treated (26,859 kg per day) by the CBMWTFs so that no BMW was shown as remaining un-treated in the State. WBPCB was intentionally understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal.”

15. That in respect of the understatement of Bio-Medical Waste, the Audit Report of Comptroller and Auditor General, (page 18) has further stated which may be reproduced below:

“An Audit analysis of the extent of understatement using average BMW generation figure of 0.231 kg per bed per day showed that BMW generation was understated atleast by 49.52 percent considering bed strength of the State as per H&FW Department data (Appendix 2.3). Thus, the efficacy of the efforts for BMW management was compromised by lack of reliable data. What appeared to be even more worrisome was that the WBPCB was intentionally understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal.”

16. That in the said report of CAG, it is stated in page 11, which reads as follows:-

- a) *“The issue of improper segregation of BMW was pointed out in the Audit Report of the Comptroller and Auditor General of India on Government of West Bengal for the year ended 31 March 2008. Even after 10 years, serious irregularities were observed by Audit in segregation of BMW in 52 (74.29 per-cent) of the 70 test-checked HCFs.”*



b) "Veterinary and other waste remained un-treated in the State. There was irregular burning and disposal in unauthorised burial pits."

17. That in report of CAG vide page 12, it has further been stated as follows:-

"The BMW data with regard to West Bengal hosted on the web-site of CPCB however, contained various anomalies impacting its reliability and highlighted monitoring failure on the part of CPCB."

18. That CAG has also stated in their report that BMW generation not assessed in the State and has commented in page 16 of the Report as follows:-

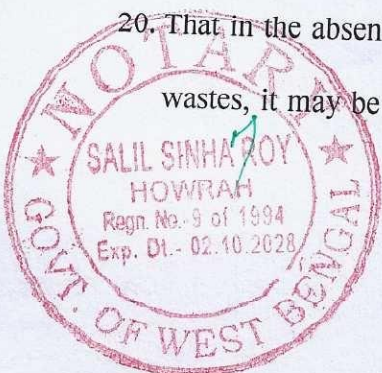
"Quantification of BMW is the first step in managing BMW. As per the mechanism to be followed, the HCFs were to report the bio-medical waste generated in terms of category and colour coding as specified in Schedule I of the BMWM Rules, to WBPCB for compilation to arrive at the total quantum of BMW generated in the State.

The mechanism failed to generate realistic data as 48.32 per cent of HCFs remained unidentified in the inventory of WBPCB."

For the kind reference of the Hon'ble Court, the photocopy of the concerned pages of the CAG report is enclosed as Annexure – P/4.

19. That inappropriate biomedical waste management will lead to serious health hazards through spreading infections and other diseases and may cause severe environmental problems through pollution of the air, soil, ground and surface water. There are several media reports that the gap between the biomedical wastes generated and processed goes back to the people. There had been no rejoinder to such media publications by any of the concerned authorities.

20. That in the absence of correct total figures of daily generation and disposal of biomedical wastes, it may be guessed that about 25% to 40% of the total such waste generated in the

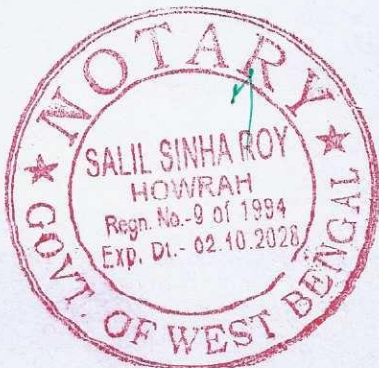


State is a major source and cause of various types of diseases, which the doctors may fail to treat appropriately and timely.

21. That it is a very difficult situation to control the bio-medical waste menace because of the absence of furnishing the correct/actual quantity of bio-medical wastes by the incumbents (HCF units) to the controlling authorities. In order to overcome this problem the concerned CEO of all the health units, generating bio-medical wastes, should submit before the appropriate authorities on affidavit about the total quantity of bio-medical wastes generated in the unit under his/her control for every quarter. Failure to submit the affidavit and furnishing the incorrect figures should attract penal actions, including cancellation of the licenses granted to such organisations. There should be periodical audits by the controlling authorities in this regard.
22. That it is apprehended by the applicant that the improper disposal of the bio-medical wastes may aggravate the situation of the environmental and health hazards in the State for which judicial intervention and monitoring have become necessary. The applicant has sent representations on this issue along with other related aspects to the concerned authorities in the matter on 14th November 2024, the photocopy of which with postal receipt has been enclosed as Annexure – P/5.
23. That being aggrieved by and dissatisfied because of inaction and silent role on such serious issues, the applicant prefers to move this application on the following amongst other:-

GROUND

- i. For that it is the bounden duty of the Respondent concerned to ensure proper collection and disposal of wastes generated from different health care centres.



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- ii. For that the concerned Respondents have failed to take steps as per the guidelines prescribed by the Central Pollution Control Board on handling, treatment and disposal of bio-medical wastes.
- iii. For that the Respondents have not implemented the order of the Tribunal as given in OA 120/2015/EZ, dated 22nd July 2021.
- iv. For that the Respondents have failed to discharge their statutory duties to arrest all hazards that are arising out of improper and unscientific disposal of Bio-medical wastes.
- v. For that the Respondents should have taken urgent measures for the proper disposal of bio-medical wastes arising out of all hospitals, health centres.
- vi. For that the Respondents concerned have failed to take steps to protect the environment and health of the people of the State of West Bengal.
- vii. For that the Respondents should have taken steps on proper collection and disposal of bio-medical wastes that are generated in all the health centres of the State of West Bengal.
- viii. For that the Respondents concerned have failed to take step as envisaged under The Bio-Medical Wastes (Management & Handling) Rules 1998 and the amendments thereafter.
- ix. For that the Respondents have failed to take steps under The Environment (Protection) Act 1986.



LIMITATION

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24. The applicant states that he has been working in the matter of Bio-Medical Wastes Management of the State of West Bengal for a continuous period since 1998. There are series of reports on improper disposal of Bio-medical wastes in the media as well as the CAG Report. It is also reported that there is a gap between the Bio-medical wastes generated and disposed, which is going to the gray market. The applicant has sent a memorandum to all concerned on 14.11.2024. The respondents have not taken step and the issues raised in the application are the outcome of a continuous process and inactions. Therefore, the application is filed within the period of limitation.

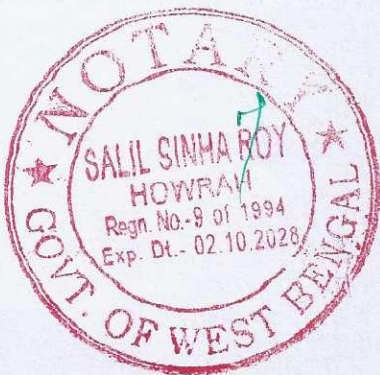
PRAYERS

This application is made bonafied and for the ends of justice.

Your applicant therefore humbly prays Your Honour for the following orders:-

- i) To direct the concerned Respondents to immediately take all steps and measures for proper implementation of the guidelines for handling, treatment and disposal of bio-medical wastes generated in all the Health Centres working within the State of West Bengal;
- ii) To direct the Respondent concerned to take steps as envisaged under the Bio-medical Waste (Management & Handling) Rules 1998 and Bio-Medical Wastes Management (Amendment) Rules 2018;

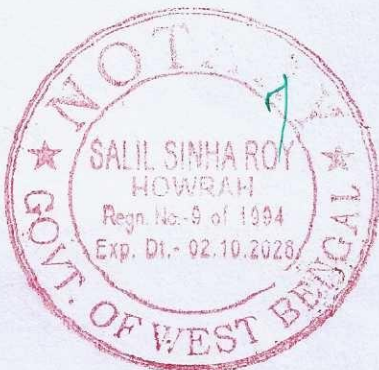
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- iii) To direct the concerned Respondents to take step for plugging the gap between the Bio-medical waste generated and finally disposed in the State;
- iv) To direct the Respondents concerned to initiate the process of submission of the details of Bio-Medical Wastes generated in the Health Centres through affidavit;
- v) To direct the Respondents concerned to take steps as prescribed in the Solid Waste Management Rules 2016;
- vi) To direct the concerned Respondents to take steps as envisaged in The Environmental (Protection) Act 1986;
- vii) Such other and/or further order or orders be made and/or direction or directions be given as Hon'ble Tribunal may deem fit and proper.

Subhas Datta
Subhas Datta



VERIFICATION

BL. NO. L-1006

I, Sri Subhas Datta, son of Late Baneswar Datta, aged about 75 years, by occupation Chartered Accountant, by religion Hinduism, residing at 25/1, Guitendal Lane, Post Office, Police Station and District - Howrah, Pin code - 711101, do hereby declare and state that the contents of the paragraph nos. 17, 8, 9, 11, 12, 13, 14-18, 22 are true to the best of knowledge and the contents of the paragraph nos. 10, 19, 20 are my information derived from the relevant records which I verily believe to be true and the rests are my respectful submissions before the Hon'ble Tribunal.

Subhas Datta
DEPONENT

Prepared by me in my office

Subhas Datta
(Subhas Datta)

Applicant-in-person

Date : 09.12.2024

Place: Howrah.

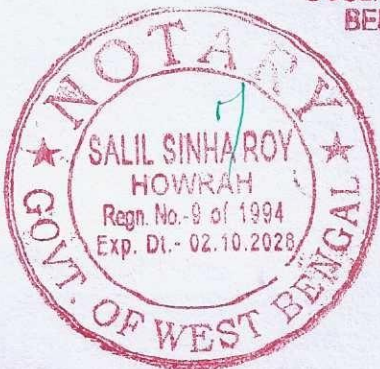
IDENTIFICATION BY ME &
SIGNED/L.T.L TAKEN IN MY PRESENCE

Jibanjib Chakraborty
Advocate

JIBANJIB CHAKRABORTY
Advocate
Howrah Judges Court
WB/1448/2000

SOLEMNLY AFFIRMED & DECLARED
BEFORE ME ON IDENTIFICATION

9-12-24
SALIL SINHA ROY
NOTARY HOWRAH



09 DEC 2024



Photographs taken on 11th May 2024 showing bio- medical wastes mixed with the general wastes in the backyard of Malbazar Superfacility Hospital

SALIL SINHA ROY
HOWRAH
Regn. No. - 9 of 1994
Exp. Dt. - 02.10.2023
GOVT. OF WEST BENGAL

09 DEC 2024



Photographs taken on 11th May 2024 showing bio- medical wastes mixed with the general wastes in the backyard of Malbazar Superfacility Hospital

NOTARY
SALIL JINHA ROY
HOWRAH
Regn. No.-9 of 1994
Exp. Dt.- 02.10.2028
GOVT. OF WEST BENGAL

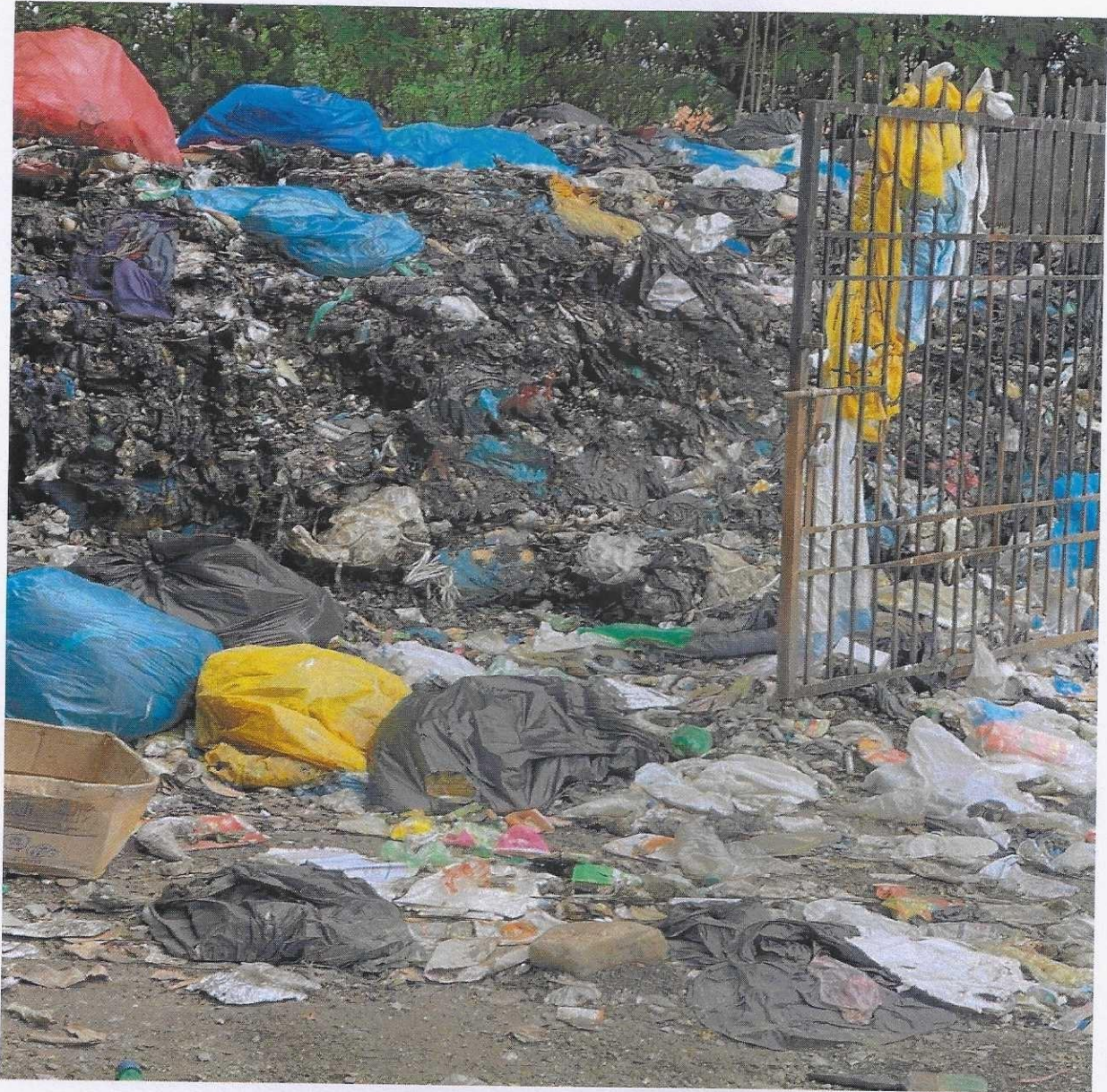
09 DEC 2024



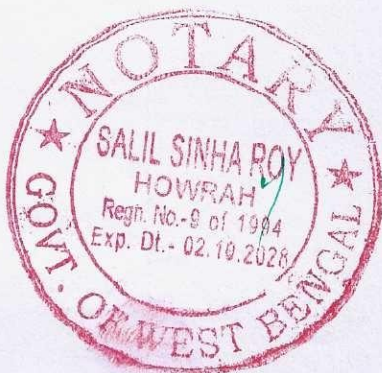
Photographs taken on 11th May 2024 showing bio- medical wastes mixed with the general wastes in the backyard of Malbazar Superfacility Hospital

NOTARY
SALIL SINHA ROY
HOWRAH
Regn. No. - 9 of 1994
Exp. Dt. - 02.10.2029
GOVT. OF WEST BENGAL

09 DEC 2024



Photograph taken on 11th May 2024 showing bio- medical wastes mixed with the general wastes in the backyard of Malbazar Superfacility Hospital



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Annexure - P/2

Dr. Rajesh Kumar, IPS
Member Secretary



LIFE
Lifestyle For
Environment

WEST BENGAL POLLUTION CONTROL BOARD

(Dept. of Environment, Govt. of West Bengal)
Paribesh Bhawan, 10A, Block - LA, Sector III,
Bidhannagar, Kolkata - 700106, INDIA
Tel. : 2202-3000 Fax : 2202-3099 City Code 033
Country Code 91
e-mail: ms.wbpcb-wb@bangla.gov.in

Memo No. 262/1S-74/2001(Pt-IX)

Date 24.07.2024

To
The Member Secretary
Central Pollution Control Board
Paribesh Bhawan
East Arjun Nagar
Delhi - 110 032

Subject: Annual Report on Bio-Medical waste management for the year 2023

Sir,

Enclosed please find herewith the Annual Report on the status of the implementation of Bio-Medical Waste Management Rules in the State of West Bengal for the year 2023 as per prescribed format given in the Rules.

Your faithfully,

[Signature]
24/7/2024

Member Secretary

Encl.: As stated above.



09 DEC 2024

Form IVA

[See rule 13(2)]

Format for Submission of the Annual Report Information on Bio-medical Waste Management (to be submitted by the State Pollution Control Boards or Pollution Control Committees and Director General Armed Forces Medical Services to Central Pollution Control Board on or before 31st July of every year for the period from January to December of the preceding calendar year)

Part-1 (Summary of Information)

(1) **Name of the Organization:** West Bengal Pollution Control Board

(2) **Name of the Nodal Officer with contact telephone number and e-mail:** Sri Swarup Kumar Mandal, Chief Engineer, Waste Management Cell, Mobile no. : 6290039008, e-mail: sec4.wbpcb-wb@bangla.gov.in

(3) **Total no. of Health Care Facilities / Occupiers:** 9927

(i) Bedded Hospitals and Nursing Homes (bedded) :	3209
(ii) Clinics, dispensaries:	Total non-bedded units: 6718
(iii) Veterinary institutions:	
(iv) Animal houses:	
(v) Pathological laboratories:	
(vi) Blood banks:	
(vii) Clinical establishment:	
(viii) Research Institutions:	
(ix) AYUSH	

(4) **Total no. of beds:** 168323

(5) **Status of authorization till 31/12/2023:**

(i) Total number of Occupiers applied for authorization: 9927

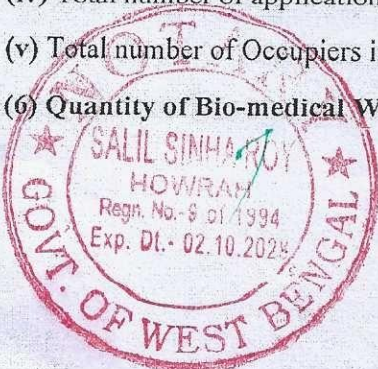
(ii) Total number of Occupiers granted authorization: 9927

(iii) Total number of application under consideration: Nil

(iv) Total number of applications rejected: Nil

(v) Total number of Occupiers in operation without applying for authorization: Nil

(6) **Quantity of Bio-medical Waste Generation (in kg/day):** 43120.87



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(Please enclose District Wise Bio-medical Waste Generation as per Part-2)- **Pl. Refer to Annexure I**

- (i) Bio-medical waste generation by bedded hospitals (in kg/day): **35603.29**
- (ii) Bio-medical waste generation by non-bedded hospitals (in kg/day): **7517.58**
- (iii) Any other: **Nil**

(7) Bio-medical waste treatment and disposal

(a) By Captive bio-medical waste treatment and disposal by Health Care Facilities (please enclose details as per Part-3): **Nil**

- (i) Number of Health Care Facilities having captive treatment and Disposal facilities: **Nil**
- (ii) Total bio-medical waste treated and disposed by captive treatment facilities in kg/day: **Nil**

(b) Bio-medical waste treatment and disposal by Common Bio Medical Waste Treatment Facilities (please enclose details as per Part 4): **Pl. Refer to Annexure II**

- (i) Number of Common Bio Medical Waste Treatment Facilities in Operation : **08**
- (ii) Number of Common Bio Medical Waste Treatment Facilities under construction: **06**
- (iii) Total bio-medical waste treated in kg/day: **43120.87**
- (iv) Total treated bio-medical waste disposed through authorized recyclers (in Kg/day): **8380.00**

(8) Total no. of violation by:

- (i) Health Care Facilities (bedded and non-bedded): **249**
- (ii) Common Bio Medical Waste Treatment Facilities: **8**
- (iii) Others (please specify): **Nil**

(9) Show cause notices/directions issued to defaulters:

- (i) Health Care Facilities (bedded and non-bedded): **249**
- (ii) Common Bio Medical Waste Treatment Facilities: **8**
- (iii) Others: **Nil**

(10) Any other relevant information:

- (i) Number of workshops / trainings conducted during the year: **2313**
- (ii) Number of occupiers installed liquid waste treatment facility: **1206**
- (iii) Number of captive incinerators complying with the norms: **NA**
- (iv) Number of occupiers organized trainings: **545**
- (v) Number of occupiers constituted Bio-medical Waste Management Committees: **9927**
- (vi) Number of occupiers submitted Annual Report for the previous calendar year: **1026**
- (vii) Number of occupiers practicing pre-treatment of lab microbiology and Bio-technology waste: **9927**
- (viii) Number of Common Bio Medical Waste Treatment Facilities that have installed Continuous Online Emission Monitoring Systems: **08**



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বায়োমেডিক্যাল বর্জ্য-দুর্নীতিতে সন্দীপ 'কেঁচো', 'কেউটে' কারা?

দেবাশিস ঘড়াই

বায়োমেডিক্যাল বর্জ্য-দুর্নীতিতে আর জি কর মেডিক্যাল কলেজ হাসপাতালের প্রাক্তন অধ্যক্ষ সন্দীপ ঘোষের নাম জড়িয়েছে। কিন্তু ওয়াকিবহাল মহল জানাচ্ছে, এই দুর্নীতিতে সন্দীপ 'কেঁচো' মাত্র, 'কেউটদের' নাম এখনও প্রকাশ্যে আসেনি। নিজেদের যুক্তির স্বপক্ষে তারা ২০১৭-'১৮ সালের কন্ট্রোলার অ্যান্ড অডিটর জেনারেল (সিএজি)-এর রিপোর্টের প্রসঙ্গ টেনে এনেছেন। যেখানে বায়োমেডিক্যাল বর্জ্যের হিসাব ইচ্ছাকৃত ভাবে কম দেখানোর জন্য রাজ্য প্রশাসনের একাংশকে কাঠগড়ায় দাঁড় করিয়েছে সিএজি।

সিএজি-র বক্তব্য, রাজ্যের নেতিবাচক ভাবমূর্তি তৈরি হওয়া আটকাতে এই কাজ করা হয়েছে। সংশ্লিষ্ট বর্জ্যের পুরোটাই প্রক্রিয়াকরণ হয়েছে, তা দেখানোই ছিল উদ্দেশ্য। কিন্তু বায়োমেডিক্যাল বর্জ্যের মতো বিপজ্জনক বর্জ্যের ক্ষেত্রে হিসাবে কারচুপিকে রীতিমতো উদ্বেগজনক বলে ব্যাখ্যা করে সিএজি যথাযথ পদক্ষেপের জন্য রাজ্য সরকারের দৃষ্টি আকর্ষণ করেছিল। সংশ্লিষ্ট রিপোর্টের উল্লেখ করে ওয়াকিবহাল মহল জানাচ্ছে, সিএজি-র রিপোর্টেই স্পষ্ট, এক জনের পক্ষে বায়োমেডিক্যাল বর্জ্য-দুর্নীতি করা অসম্ভব। কারণ, সিএজি প্রশাসনের একাংশের দিকে এ ক্ষেত্রে আঙুল তুলেছিল।

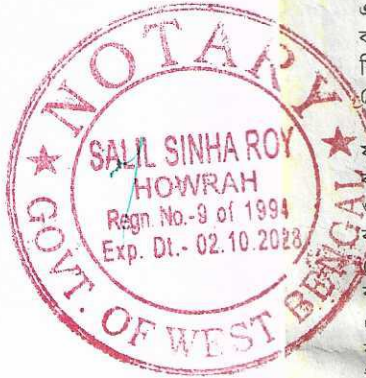
রাজ্যের স্বাস্থ্য প্রশাসনের সঙ্গে যুক্ত এক কর্তা জানাচ্ছেন, দৈনিক বায়োমেডিক্যাল বর্জ্যের হিসাব অত্যন্ত গুরুত্বপূর্ণ। কারণ, এর উপরে নির্ভর করে বোঝা যায়, প্রক্রিয়াকরণের ক্ষেত্রে কতটা ফারাক রয়েছে। ওই কর্তা বলছেন, "কোভিডের সময়ে আমরা দেখেছিলাম, যত্রতত্র বায়োমেডিক্যাল বর্জ্য পড়ে রয়েছে। সেগুলি কিন্তু হিসাবের মধ্যে রাখা ছিল না। অথচ, রাজ্য সরকারের হিসাব বলছে, পুরো অংশেরই প্রক্রিয়াকরণ হয়েছে।" বায়োমেডিক্যাল বর্জ্য প্রক্রিয়াকরণের সঙ্গে যুক্ত এক 'কমন বায়োমেডিক্যাল ওয়েস্ট ট্রিটমেন্ট ফেসিলিটি অপারেটর' (সিবিডব্লিউটিএফ)-এর এক কর্তার কথায়, "পুরোটা প্রক্রিয়াকরণ হয় না। কারণ, হাসপাতাল থেকে আমাদের

কাছে পুরোটা আসেই না। যতটা আসে, আমরা সেই পরিমাণ প্রক্রিয়াকরণ করে তার তথ্য সরকারের কাছে জমা দিই।"

তা হলে হাসপাতাল থেকে উৎপন্ন বায়োমেডিক্যাল বর্জ্য-স্মল-কোথায়? এখানেই সন্দীপ বা 'সন্দীপ ঘোষদের' ভূমিকা অত্যন্ত গুরুত্বপূর্ণ বলে মনে করছে ওয়াকিবহাল মহল। সন্দীপের বিরুদ্ধে অভিযোগ, তিনি সংশ্লিষ্ট বর্জ্যের একাংশ বাইরে বিক্রি করতেন। কারণ, কোনও হাসপাতালের মোট বায়োমেডিক্যাল বর্জ্যের বড় অংশই হল প্লাস্টিক-বর্জ্য, যার পরিমাণ মোট বর্জ্যের অন্তত ৩০ শতাংশ। এর মধ্যে স্যালাইনের বোতল, আইভি টিউব, প্লাস্টিক সিরিঞ্জ, দস্তানা, জলের বোতল-সহ একাধিক সরঞ্জাম রয়েছে। উপাদানের নিরিখে হাসপাতালের এই প্লাস্টিক-বর্জ্যের সিংহভাগই পুনর্ব্যবহারযোগ্য। কারণ, এগুলি পলিপ্রোপিলিন দিয়ে তৈরি, যা জীবাণুনাশ করে পুনরায় ব্যবহার করা যায়। এই অংশই সন্দীপ বাইরে বিক্রি করতেন বলে অভিযোগ। যদিও প্রশাসনের এক কর্তার কথায়, "যে ভাবে এই চক্র হাসপাতালে কাজ করে, তাতে এক জনের পক্ষে পুরো প্রক্রিয়া নিয়ন্ত্রণ করা কখনওই সম্ভব নয়।"

সিএজি তাদের রিপোর্টে এ-ও জানিয়েছিল, রাজ্যের সামগ্রিক বায়োমেডিক্যাল বর্জ্য ব্যবস্থাপনার কর্মদক্ষতা নিয়ে প্রশ্ন রয়েছে। কারণ, এই বর্জ্য নিয়ে ভরসাযোগ্য তথ্যের অভাব (ল্যাক অব রিলায়েবল ডেটা)। ফলে সিএজি-র বয়ানেই ইঙ্গিত পাওয়া যাচ্ছে যে, বর্জ্যের হিসাবের কারচুপির একটি প্রাতিষ্ঠানিক রূপ রয়েছে। এবং তা এক দিনে তৈরি হয়নি, কোনও এক নির্দিষ্ট ব্যক্তির হাত ধরেও তৈরি হয়নি। সিবিডব্লিউটিএফ-এর এক কর্তার কথায়, "আমরা চাই, এ বিষয়ে সিবিআই তদন্ত করুক। সমস্ত তথ্য পরিষ্কার হোক। কারণ, আমরাও তো পুরো বর্জ্য পাই না। অথচ বর্জ্যের প্রক্রিয়াকরণ করেই তো আমাদের আয়। কথায় আছে না, কেঁচো খুঁড়তে কেউটে। সন্দীপ ঘোষ! শুধু কেঁচো। দেখুন, কেউটেরা কোনও গর্তে লুকিয়ে রয়েছে।"

সেই 'কেউটদের' সন্ধান পাবে সিবিআই? সবার দৃষ্টি সে দিকেই।



09 DEC 2024

Sandeep Ghosh is 'earthworm', who is real culprit in biomedical waste-corruption?

Debashis Ghraai

Sandeep Ghosh, former principal of RG Kar Medical College Hospital, has been implicated in the biomedical waste scandal. But informed sources say that Sandeep is only 'earthworm' in this corruption, the name of the real culprit has not yet come to light. In support of their arguments, they cited the report of the Controller and Auditor General (CAG) for the year 2017-18, where the CAG has put a part of the state administration in the dock for deliberately showing less biomedical waste!

According to the CAG, this has been done to prevent negative image of the state. The objective was to show that the waste concerned had been fully processed. But the CAG drew the attention of the state government for appropriate action, describing the rigging as a matter of concern as in the case of hazardous waste like biomedical waste. Referring to the relevant report, informed sources say that it is clear from the CAG report that it is impossible for one person to commit biomedical waste-corruption. Because, the CAG pointed a finger at a section of the administration in this case.

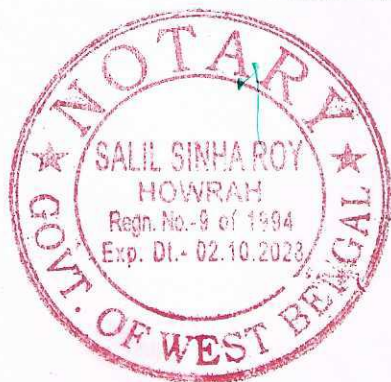
An official associated with the state's health administration says daily biomedical waste accounting is very important. Because, depending on it, how much difference there is in processing. The official says, "During Covid, we saw biomedical waste lying everywhere. But it was not accounted for. However, the state government's account says that the entire portion has been processed." In the words of an owner of a 'Common Biomedical Waste Treatment Facility Operator' (CBWTF) involved in the processing of biomedical waste, "Not all processing is done. Because we do not get the entire quality from the hospitals. As much as it comes in, we process that amount and submit that information to the government."

If so, where does the biomedical waste generated from the hospital go? This is where the role of Sandeep or 'Sandeep Ghosh' is considered very important. Allegation against Sandeep was that he used to sell part of the waste in question. Because plastic waste constitutes a major part of the total biomedical waste of a hospital, accounting for at least 30 percent of the total waste. It includes several tools including saline bottles, IV tubes, plastic syringes, K gloves, water bottles. In terms of material, the vast majority of this plastic-waste from all hospitals is recyclable. Because, they are made of polypropylene, which can be sterilized and reused. It is alleged that Sandeep used to sell this part outside. However, in the words of one administration official, "The way this cycle works in hospitals, it is never possible for one person to control the entire process."

The CAG in its report also said that there are questions about the efficiency of overall biomedical waste management in the state. Because, lack of reliable data on this waste (Lack of reliable data). As a result, the CAG statement itself indicates that there is an institutionalized form of manipulation of waste accounting. And it was not created in a day, not even by the hand of a particular person.

In the words of a CBWTF official, "We want the CBI to investigate this matter. Let all the facts be clear. Because we don't get the whole waste either. But we get our income by processing the waste. There is no word, we can dig earthworms. Sandeep Ghosh is only Earthworm. Look, the cutera is hiding in a hole."

Will the CBI find those 'cutes'? Everyone's eyes are on that.



English of ABP @ 4.09.2024

09 DEC 2024

বায়োমেডিক্যাল বর্জ্যে বার্ষিক ২১ কোটি টাকার লেনদেন! নেপথ্যে কোন চক্র?

নিজস্ব সংবাদদাতা

আর জি কর মেডিক্যাল কলেজ হাসপাতালের সদ্য প্রাক্তন অধ্যক্ষ সন্দীপ ঘোষের বিরুদ্ধে বায়োমেডিক্যাল বর্জ্য বাইরে বিক্রির অভিযোগ উঠেছে। কিন্তু স্বাস্থ্য প্রশাসনের সঙ্গে যুক্ত একাংশের বক্তব্য, সন্দীপ একা নন, বরং এর সঙ্গে একটি চক্র জড়িত। তাঁদের যুক্তি, বায়োমেডিক্যাল বর্জ্য বিক্রি 'ইন্ডাস্ট্রি'র বার্ষিক টার্নওভার কমপক্ষে ২১ কোটি টাকা! স্বাভাবিক ভাবেই এই ২১ কোটি টাকার লেনদেন কোনও এক জনের পক্ষে নিয়ন্ত্রণ করা কঠিন, বিশেষত হাসপাতালের কাঠামোর মধ্যে। অনেক হাত ঘুরে ওই সব জিনিসের লেনদেন চলে, যার প্রতি পর্বেই থাকে কাঁচা টাকার সংযোগ।

বায়োমেডিক্যাল বর্জ্য ব্যবস্থাপনার সঙ্গে যুক্ত 'কমন বায়োমেডিক্যাল ওয়েস্ট ট্রিটমেন্ট ফেসিলিটি অপারেটর' (সিবিডব্লিউটিএফ)-দের একাংশের বক্তব্য, কোনও হাসপাতালের মোট বায়োমেডিক্যাল বর্জ্যের বড় অংশই হল প্লাস্টিক-বর্জ্য। যার পরিমাণ মোট বর্জ্যের অন্তত ৩০ শতাংশ। সেই বর্জ্যের মধ্যে স্যালাইনের বোতল, আইভি টিউব, প্লাস্টিকের সিরিঞ্জ, গ্লাভস, জলের বোতল-সহ একাধিক সরঞ্জাম থাকে।

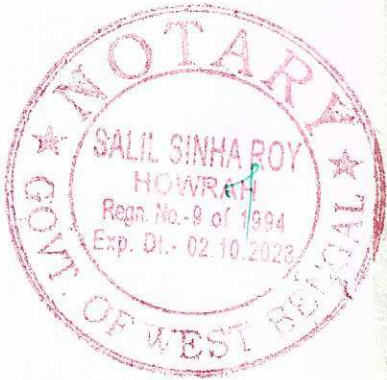
কেন্দ্রীয় দূষণ নিয়ন্ত্রণ পর্ষদের তথ্য জানাচ্ছে, রাজ্যে দৈনিক বায়োমেডিক্যাল বর্জ্যের পরিমাণ প্রায় ৩৯ হাজার কিলোগ্রাম। এই ভিত্তিতে বিশ্লেষণ করলে হাসপাতালে দৈনিক প্লাস্টিক-বর্জ্যের পরিমাণ দাঁড়ায় কমপক্ষে ১১৭০০ কিলোগ্রাম। নিয়ম অনুযায়ী, অন্য বায়োমেডিক্যাল বর্জ্যের মতো যাবতীয় প্লাস্টিক-বর্জ্যও প্রক্রিয়াকরণের জন্য স্বীকৃত সিবিডব্লিউটিএফ-এর হাতে তুলে দেওয়ার কথা। কিন্তু আর জি করের প্রাক্তন অধ্যক্ষের বিরুদ্ধে অভিযোগ, তা করার পরিবর্তে প্লাস্টিক-বর্জ্য বাইরে বিক্রি করতেন তিনি।

এই পুরো কাজে কত টাকার

লেনদেন জড়িয়ে? ওয়াকিবহাল মহলের একাংশ জানাচ্ছে, পুনর্ব্যবহারযোগ্য প্লাস্টিকের দর কেজি প্রতি কমপক্ষে ৫০ টাকা। এ বার ১১৭০০ কিলোগ্রাম প্লাস্টিক-বর্জ্যের সঙ্গে দৈনিক প্রায় ৫.৮৫ লক্ষ টাকার লেনদেন জড়িয়ে আছে। অর্থাৎ, মাসে প্রায় ১.৭৫ কোটি, বছরে প্রায় ২১ কোটি টাকার লেনদেন হয় পুরো প্রক্রিয়ায়। তবে এই হিসাবটি শুধু আর জি করের নয়, এটি গোটা রাজ্যের আনুমানিক হিসাব। যে পরিমাণ বর্জ্যের কথা খাতায়কলমে লেখা রয়েছে, এই হিসাব তার ভিত্তিতে করা বলে জানাচ্ছে বর্জ্য প্রক্রিয়াকরণের সঙ্গে যুক্ত মহলের একাংশ।

বিশেষজ্ঞদের একাংশের আবার বক্তব্য, উপাদানের নিরিখে ওই প্লাস্টিক-বর্জ্যের সিংহভাগই পুনর্ব্যবহারযোগ্য। কারণ, সেগুলি পলিপ্রোপিলিন দিয়ে তৈরি। কলকাতা বিশ্ববিদ্যালয়ের 'পলিমার সায়েন্স অ্যান্ড টেকনোলজি'-র অধ্যাপক শমিতকুমার রায় জানাচ্ছেন, পলিপ্রোপিলিনে তৈরি স্যালাইনের বোতল, জলের বোতল, প্লাস্টিকের সিরিঞ্জ— সবই জলে ২০ মিনিট ধরে ফুটিয়ে জীবাণুনাশ করা যায়। তাঁর কথায়, “এই প্লাস্টিকের রাসায়নিক গঠন ও গুণমান ভাল হওয়ায় এগুলি বেঁকে যায় না। অবিকৃত অবস্থাতেই থাকে। কিন্তু উপাদানের বাইরে বিচার করলে বায়োমেডিক্যাল বর্জ্য তো বিক্রি করারই কথা নয়।” আর এক বিশেষজ্ঞের কথায়, “প্লাস্টিকের সিরিঞ্জগুলি আমাদের সামনে ফেলা হয় বালতি বা অন্য পাত্রে। কিন্তু সেগুলি পরে তুলে অন্য সংস্থার লোগো লাগিয়ে ব্যবহার করা হতে পারে। অন্য সরঞ্জামের ক্ষেত্রেও একই খেলা চলে।” বিশেষজ্ঞেরা জানাচ্ছেন, দিনের পর দিন এই লেনদেন চলে জনস্বাস্থ্যের মতো গুরুত্বপূর্ণ বিষয়কে বিপদের দিকে ঠেলে দিয়ে।

এই লেনদেনের কোথায় শুরু, কোথায় শেষ, তার কোনও সূত্র মেলে কিনা, আপাতত সেটাই দেখার।



09 DEC 2024

Amanabazar Patra 28.08.2024

Annual transaction of 21 million rupees in biomedical waste! Any cycle in the background?

own correspondent

Sandeep Ghosh, the recently ex-principal of RG Kar Medical College Hospital, has been accused of selling biomedical waste. But a section associated with the health administration said that Sandeep is not alone, rather a circle is involved. Their argument is that the annual turnover of the biomedical waste 'industry' is at least 21 crores! Naturally, this transaction of Rs 21 crore is difficult for any one person to control, especially in a hospital set-up. Transactions of all those things go through many hands, every phase of which is connected with cash money.

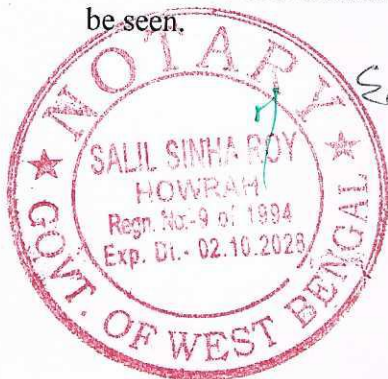
According to a group of 'Common Biomedical Waste Treatment Facility Operators' (CBWTFs) associated with biomedical waste management, plastic waste constitutes a major part of the total biomedical waste generated in a hospital, which amounts to at least 30 percent of the total waste. That waste includes multiple tools—including saline bottles, IV tubes, plastic syringes, gloves, water bottles.

According to the Central Pollution Control Board, the amount of daily biomedical waste in the state is about 39 thousand kilograms. Analyzing on this basis, the daily amount of plastic-waste in the hospital is at least 11700 kilograms. As per rules, all plastic-waste, like other biomedical waste, is to be handed over to a recognized CBWTF for processing. But the allegations against the former RG Kar chief, instead of doing that, he used to sell the plastic-waste outside.

How much money does this whole work involved in the transaction? A section of informed circles says that the price of recyclable plastic is at least 50 rupees per kg. This time around 5.85 lakh rupees daily transaction is involved with 11700 kg plastic waste. That is, about 1.75 crores per month, about 21 crores per year are transacted in the whole process. But this calculation is not only of RG Kar, it is an estimate of the entire state. This calculation is based on the amount of waste that is written in the ledger, which is a part of the area associated with waste processing. The experts again belong to a group.

In terms of material, the vast majority of plastic waste is recyclable. Because, they are made of polypropylene. Shamitkumar Roy, professor of 'Polymer Science and Technology' of Calcutta University, says that saline bottles made of polypropylene, water bottles, plastic syringes - all can be sterilized by boiling in water for 20 minutes. In his words, "The chemical composition and quality of these plastics are good, so they do not bend. They remain intact. But judging from the material, biomedical waste is not worth selling." According to another expert, "Plastic syringes are thrown in front of us in buckets or other containers. But they can be picked up and used with logos of other companies. The same goes for other equipment." Experts say, day after day, this transaction goes on by pushing important issues like public health into danger.

Where does this transaction start, where does it end, whether there is any clue, for now, that is to be seen.



Encl. of ABP 28-08-2024

09 DEC 2024

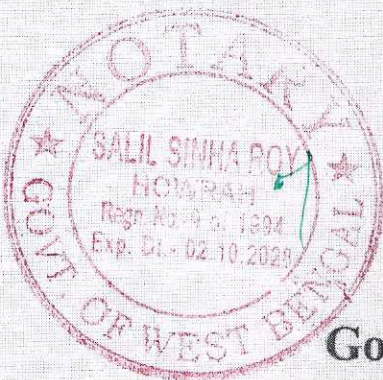


सत्यमेव जयते

**Report of the
Comptroller and Auditor General of India
on
General and Social Sector
for the year ended March 2018**



लोकहितार्थ सत्यनिष्ठा
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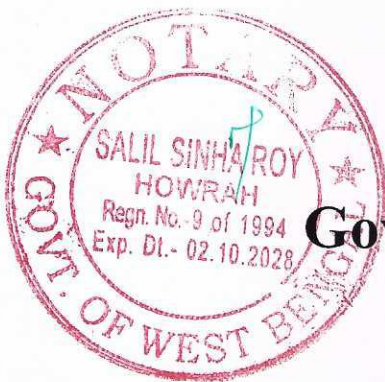


**Government of West Bengal
Report No. 1 of 2020**

09 DEC 2024

**Report of the
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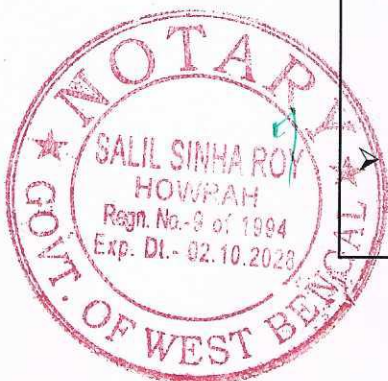
For the year ended March 2018



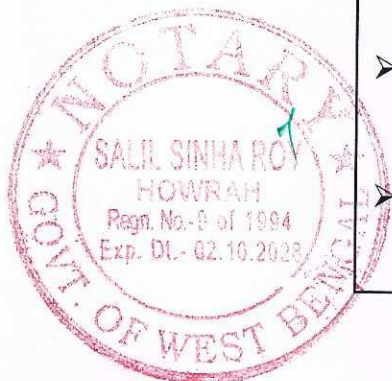
**Government of West Bengal
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09 DEC 2024

- WBPCB's inventory of BMW generating units was incomplete. 48 per cent of the BMW generating units remained outside the purview of WBPCB monitoring.
- BMW generation was not assessed in the State. Quantification of BMW is the first step in managing BMW. HCFs were to report the bio-medical waste generated in terms of category and colour coding as specified in Schedule I of the BMW Rules 2016, to WBPCB for compilation to arrive at the total quantum of BMW generated in the State. In seven test-checked WBPCB Circle Offices (COs)/ Regional Offices (ROs), 97 per cent of the identified HCFs, did not submit Annual Reports during the period 2015-18.
- BMW remained un-treated. In the Annual Report of 2016, WBPCB understated the quantity of BMW generation (26,859 kg per day) to match the figure of BMW shown as treated (26,859 kg per day) by the CBMWTFs so that no BMW was shown as remaining un-treated in the State. WBPCB was intentionally understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal.
- No operational research activity was undertaken or supported by the State to assess the risk posed by BMW to the health and environment. Further, there was lack of public awareness of the harm caused by BMW and limited knowledge of pollution prevention which made the risk assessment more essential.
- CBMWTFs failed to comply with Central Pollution Control Board (CPCB)'s norms of distance and beds to be covered, to ensure waste disposal within 48 hours of generation. 3,037 Metric Tonne (MT) of BMW reported to have been collected by four out of six CBMWTFs was beyond the capacity of the installed incinerators, even presuming the incinerators operated in full capacity round the clock during the period from 2013 to 2016.
- Gap between the requirement and availability of BMW treatment facilities was not analysed and as such there was no Action Plan for development of new CBMWTFs.
- WBPCB reported unrealistic figures of treatment of BMW in its Annual Reports, which was even beyond the installed capacity of the CBMWTFs.
- Though WBPCB attributed poor compliance to the BMW Rules to lack of awareness amongst various stakeholders it failed to establish co-ordination with H&FW Department for organising any centralised training during the period under review. In last five years, WBPCB had conducted only eight Workshops in nine months between December 2016 and August 2017.
- Training to generators and handlers of BMW was deficient. 81 per cent of the total staff handling BMW in the test-checked 39 Government HCFs remained untrained.



- There was lack of awareness among other Government Departments (e.g., Animal Resources Development, Correctional Administration, Home & Hill Affairs, etc.) contributing to BMW.
- The issue of improper segregation of BMW was pointed out in the Audit Report of the Comptroller and Auditor General of India on Government of West Bengal for the year ended 31 March 2008. Even after 10 years, serious irregularities were observed by Audit in segregation of BMW in 52 (74.29 per cent) of the 70 test-checked HCFs.
- Highly infectious blood samples were found scattered. BMW was disposed with Municipal wastes. Absence of red plastic bags for segregation of recyclable (plastic) BMW was noticed across the test-checked HCFs. Yellow plastic bags were used to collect the plastic BMW, leading to incineration of the plastic BMWs emitting highly toxic chemical called dioxin.
- The status of health check-up, immunisation and provisioning of personal protective equipment for health care workers and others handling BMW in the test-checked HCFs was poor.
- There was deviation of storage norms at CBMWTFs. None of the CBMWTFs were found to be using closed trolleys. Moreover, none of the CBMWTFs, except West Bengal Waste Management Limited (WBWML), Haldia, had installed any automatic feeding device for feeding of BMW into incinerators to avoid manual feeding.
- There was irregular collection and transportation of BM waste by the CBMWTFs. Non-lifting of BMW by CBMWTFs was never reported by HCFs to WBPCB. Hired vehicles, not fully covered vehicles, which were used were not dedicated for BMW carriage.
- Veterinary and other waste remained un-treated in the State. There was irregular burning and disposal in unauthorised burial pits.
- There was no separate collection system and no effluent treatment system in place for liquid chemical waste in 94.29 per cent test-checked HCFs.
- Treatment before disposal was poor in CBMWTFs. Continuous emission monitoring of flue gas not carried out. The emissions were beyond safety standards. Autoclaves meant for disinfecting plastic, glasses and sharp waste were not in operation in four out of six CBMWTFs. Plastic and sharp wastes were also burnt in incinerator.
- Prioritisation of prevention and minimisation of BMW generation over treatment and disposal of BMW, remained un-addressed in the State.
- Control and Monitoring mechanisms were not in place. Clinical Establishment licences were issued to 390 HCFs without valid BMW authorisation.
- Under test-checked WBPCB Regional Offices and Circle Offices jurisdiction, 74.88 per cent of 4,164 HCFs were operating without valid authorisation.



- Supervision and monitoring by the BMW Committees in HCFs was found to be inadequate.
- The BMW data with regard to West Bengal hosted on the web-site of CPCB, however, contained various anomalies impacting its reliability and highlighted monitoring failure on the part of CPCB.
- In spite of widespread violations of the Rules and Standards by the HCFs and the CBMWTFs across the State, no punitive action against the defaulters under Section 5 and Section 15 of Environment Protection Act, 1986 was found to have been taken by WBPCB to enforce compliance.
- In the absence of orders clearly delineating the duties and responsibilities of the various functionaries involved in implementation at various levels of the organisational hierarchy either under the WBPCB or under various Departments, no responsibility was fixed at any level of the organisational hierarchy despite gross and widespread irregularities in violations of BMW Rules, 2016.

2.1.1 Introduction

Waste management is an important factor in safeguarding human health and environment protection. Improper waste management may cause adverse health problems by spreading infections and diseases and may cause severe environmental problems by polluting the air and the soil, surface water and groundwater.

Some examples are:

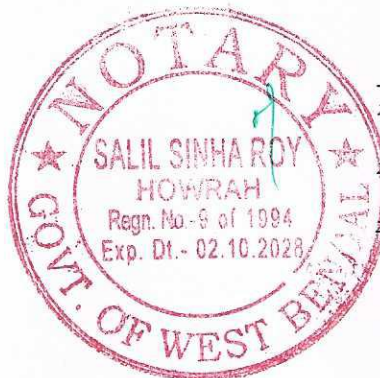
- Soil can be contaminated with toxic components;
- Leachate²³ from waste can pollute surface water and ground water;
- Uncontrolled burning of waste produces toxic and carcinogenic gases; and
- Leaks of radioactive substances can contaminate the air and soil.

Waste is categorised as hazardous and non-hazardous (also called solid waste). Bio-Medical waste is a form of hazardous waste because it contains properties which render them hazardous. As per the Bio-Medical Waste Management Rules, 2016 (BMWM Rules) the term “Bio-Medical Waste” (BMW) means any waste, which is generated during the diagnosis, treatment or immunisation of human beings or animals or research activities pertaining thereto or in the production or testing of biologicals²⁴ or in health camps, including the categories mentioned in Schedule I²⁵ appended to the BMWM Rules, 2016.

²³ Water that dissolves contaminants as it trickles through waste disposed of in a landfill. Leaching may result in hazardous substances entering surface water, ground water or soil.

²⁴ Preparation made from organisms or micro-organisms or product of metabolism and biochemical reactions intended for use in health care of human beings or animals.

²⁵ (a) Human Anatomical Waste, (b) Animal Anatomical Waste, (c) Soiled Waste, (d) Expired or discarded medicines, (e) Chemical Waste, (f) Chemical Liquid Waste, (g) Discarded linen, mattresses, beddings contaminated with blood or body fluid, (h) Microbiology, Biotechnology and other clinical laboratory waste, (i) Contaminated Waste (Recyclable), (j) Waste sharps including Metals, (k) Glassware and (l) Metallic Body Implants.



2.1.5 Previous Audit Coverage

A performance audit on 'Management of Bio-Medical and Plastic Waste' was included in the Audit Report of the Comptroller and Auditor General (CAG) of India on the Government of West Bengal (Civil) for the year ended 31 March 2008. The observations arising out of the present audit have been juxtaposed with the responses made by the WBPCB against the earlier report. The current study, however, does not cover Plastic waste.

Audit Findings

2.1.6 Quantification of Bio-Medical Waste and Assessment of Risk

2.1.6.1 WBPCB's inventory of BMW generating units was incomplete

According to BMW Rules, 2016, the responsibility of inventorisation of Occupiers and data on bio-medical waste generation, treatment and disposal vests with State Pollution Control Boards (SPCBs).

WBPCB did not establish a system or device a mechanism whereby it could establish linkages between Departments like H&FW, ARD, Correctional Administration, H&HA, etc. and integrate data for developing a dependable inventory of BMW generating units. It was observed that 48.32 per cent of the existing HCFs remained outside the inventory of the WBPCB as shown below:

Table 2.2: Comparison between inventory of WBPCB and list of the controlling Departments

Particulars	No. as per Departmental statistics ³²			No. as per WBPCB		
	Bedded	Non-bedded	Total	Bedded	Non-bedded	Total (percentage)
No. of HCFs	2,879	7,835	10,714	2,477	3,060	5,537 (51.68)
Bed Strength	1,47,401	0	1,47,401	1,06,193	0	1,06,193 (72.04)

Source: Departmental statistics of H&FW Department and WBPCB database/ records

Thus, the inventory maintained by WBPCB in respect of BMW generating units in the State was incomplete. In reply (February 2019), the Department of Environment stated that WBPCB has started collating the list of HCFs with Health Department.

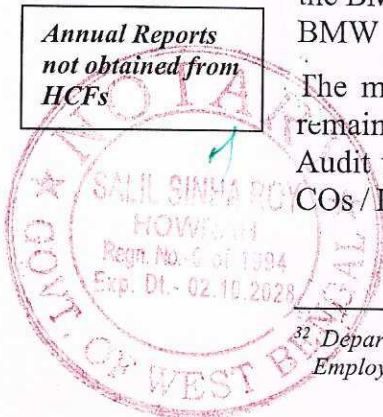
2.1.6.2 BMW generation not assessed in the State

Quantification of BMW is the first step in managing BMW. As per the mechanism to be followed, the HCFs were to report the bio-medical waste generated in terms of category and colour coding as specified in Schedule I of the BMW Rules, to WBPCB for compilation to arrive at the total quantum of BMW generated in the State.

The mechanism failed to generate realistic data as 48.32 per cent of HCFs remained unidentified in the inventory of WBPCB. It was also observed by Audit that 97 per cent of the identified HCFs, in seven test-checked WBPCB COs / ROs, did not submit Annual Reports during the period from 2015 to 2018.

48.32 per cent of BMW generating units in the State remained outside the purview of WBPCB monitoring

Annual Reports not obtained from HCFs



³² Departmental statistics includes H&FW, ARD, H&HA and CA Departments and hospitals under Employees' State Insurance (Medical Benefit) Scheme

2.1.6.4 Understatement of BMW generation to match the figure of BMW shown as treated

WBPCB understated the quantity of BMW generation to match the figure of BMW shown as treated.

The steep fall in the quantity of waste generation from 2015, as noted in Table 2.3 above, raised doubts as to the reliability of the data reported in the Annual Reports by WBPCB. Scrutiny showed that in the Annual Report of 2016, WBPCB understated the quantity of BMW generation (26,859 kg per day) to match the figure of BMW shown as treated (26,859 kg per day) by the CBMWTFs so that no BMW was shown as remaining un-treated in the State. It was observed that WBPCB took such decision of depicting the figure of BMW treated as equal to the figure of BMW generation 'to avoid a negative portrayal of the State' which was a matter of serious concern and called for immediate attention of the Government for fixing of responsibility.

An audit analysis of the extent of understatement using average BMW generation figure of 0.231 kg³³ per bed per day showed that BMW generation was understated at least by 49.52 per cent considering bed strength of the State as per H&FW Department data (Appendix 2.3). Thus, the efficacy of the efforts for BMW management was compromised by lack of reliable data. What appeared to be even more worrisome was that the WBPCB was intentionally understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal.

The Department of Environment/ WBPCB accepted the audit observations during an Exit Conference held in March 2019.

2.1.6.5 Absence of research on risk to environment and health posed by BMW

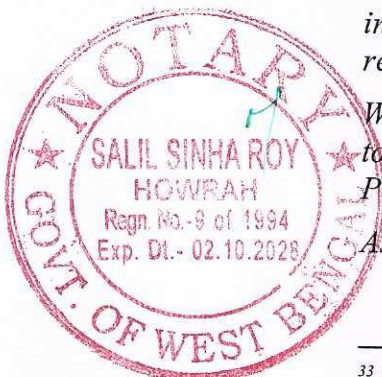
As per BMW Rules, 2016, the H&FW Department was to undertake or support operational research and assessment with reference to risks to environment and health from BMW and previously unknown disposables and wastes from new types of equipment. This was necessary for identifying various aspects of risks involved with BMW, so that steps may be taken to contain generation of BMW and to manage the BMW generated. Further, lack of public awareness of the harm caused by BMW and limited knowledge of pollution prevention makes the risk assessment more essential.

No operational research activity was, however, ever undertaken or supported in the State to assess the risk posed by BMW to the health and environment.

Conclusions: Even after two decades of implementation of the Rules, WBPCB did not establish a system or devise a mechanism whereby it could establish linkages between Departments and integrate data for developing a dependable inventory of BMW generating units. 48.32 per cent of the existing HCFs remained outside the inventory of the WBPCB.

WBPCB could not quantify actual BMW generation in the State and continued to depend on hypothetically arrived at figures for reporting to the Central Pollution Control Board (CPCB).

Assessment of quantity of BMW at source of generation was deficient.



³³ As per the Training Module (2003) on 'Health Care Waste Management' of H&FW Department

Subhas Datta
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Environmental Activist

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To
The Chief Secretary,
Govt. of West Bengal,
Nabanna,
325, Sarat Chatterjee Road,
Howrah- 711102

14.11.2024

Sir,

Sub:- Appropriate disposal of Bio- medical wastes as per Bio-Medical Waste Management (Amendment Rules) 2018 and implementation of NGT's order, passed on 22nd July 2021 in OA 120/2015/EZ

1. That Hon'ble National Green Tribunal, vide order dated 22nd July 2021 in OA 120/2015 EZ, had given few directions with regard to proper disposal of Bio-Medical Wastes, which were primarily based on the inspection report of the Joint Committee comprising of CPCB and State PCB undertaking the environmental audit of the six Government run hospitals and other organizations. Certain other shortcomings had also been reported on which the Hon'ble Tribunal had given several orders/directions from time to time.
2. That in the order of disposal of the matter, dated 22nd July 2021, the Hon'ble Tribunal it has recorded as follows:-

"It is evident from the report of the Joint Committee of CPCB and State PCB that the liquid waste generated from these medical colleges are within the standard limit prescribed except for BOD which is slightly on the higher side. However, it is also stated in the report that the provisions of Rules, 2016 were amended on 16th March, 2018 and Bio-Medical Waste Management (Amendment) Rules, 2018 were promulgated wherein in Rule 8(2), there is a provision that "for discharge into public sewers with terminal facilities, the general standards as notified under the Environment (Protection) Act, 1986 (29 of 1986) shall be applicable and the 19 general standard of BOD for discharge into public sewer as notified under the Environment (Protection) Act, 1986 (29 of 1986) is 350 mg/l, which is much above the level of discharge for BOD



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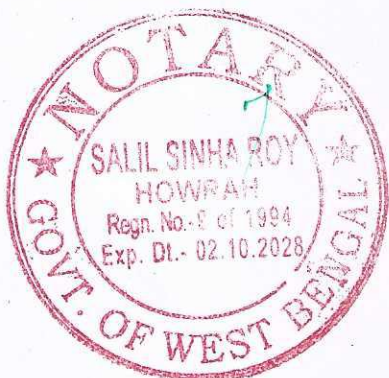
as reported in the Joint Committee for the hospitals concerned.”

“In view of the above submissions and since the directions given by the Tribunal in its various orders have been complied with except the assessment of Environmental Compensation for the Government run hospitals for their past violations, we feel that the matter can be disposed of by giving certain directions which are as under:-

i) The Central Pollution Control Board and the State Pollution Control Board shall assess the Environmental Compensation of six Government run hospitals mentioned in para 7 hereinabove for their past violations and take steps to recover the same;

ii) Even though the Bio-medical Waste Management (Amendment) Rules, 2018 (amended on 16th March, 2018) lays down the standard of discharge of BOD at the outlet point to 350 mg/l and the value observed in all the six Government run hospitals at the outlet point of untreated waste is below the said prescribed limit and since the other values (pH, TSS, COD, O&G) are within the prescribed standards, a question is raised as to whether it is necessary to install Effluent Treatment Plants (ETPs) in the hospitals. We are of the considered opinion that as a precautionary measure, the ETPs which were directed to be established and for which considerable work has already been done shall be completed and installed in all the six Government run hospitals within the timeline provided. This will ensure that no untreated liquid waste is discharged in future and will help in remedying the situation in an environmental friendly manner. More so, with regard to the implementation of Bio-Medical Waste Management Rules, 2016, installation of ETPs is mandatory for above 10 (ten) bed hospitals.

iii) The State Pollution Control Board is directed to monitor the working of the Government run hospitals as well as the private run hospitals with regard to the compliance of the Bio-Medical Waste Management Rules periodically and if any violation is



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found in the hospitals, it shall take appropriate action against the concerned erring hospital in accordance with law.

iv) Disposal of bio-medical waste in general bins so as to be part of municipal waste or unscientific handling sewage and other liquid waste without safeguards can also be hazardous. The PCB must ensure the need to incorporate best practices in the light of further experience and new thoughts emerging from time to time, apart from continued supervision and monitoring, compiling data in an outline format, use of electronic/digital manifest system to track and log bio-medical waste from all sources, preventing its accidental spillage, analyzing the data for strategic planning and the feedback by creating necessary software, to the extent viable, as per the directions given by the National Green Tribunal, Principal Bench, New Delhi in Original Application No. 72/2020 (Re: Scientific Disposal of Bio-Medical Waste arising out of COVID-19 treatment-compliance of BMW Rules, 2016).”

3. That it has been gathered from the reliable sources that there are non-compliances as follows:-

- a) No Environmental Compensation has been assessed as yet.
- b) The constructions and operations of the ETPs in Govt. hospitals have not yet been done.
- c) The best protection and monitoring in the disposal of the bio-medical wastes are yet to be adopted.
- d) Bio-Medical wastes are mixed with other general wastes in many places (HCF).

4. That from the Annual Report on Bio-Medical Wastes Management for the year 2023 (submitted by the State Pollution Control Board to the Central Pollution Control Board, vide Memo No. 262/18-74/2001 (Pt-IX), dated 24.07.2024 it has been evident as follows:-

Description

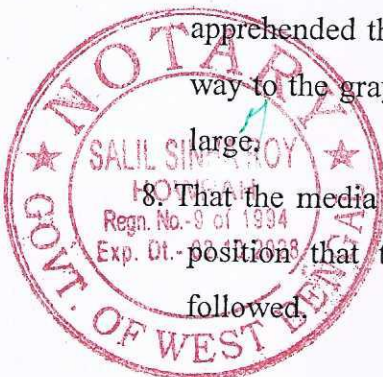
I Bedded Hospitals and Nursing Homes (bedded)	3209 Nos
II Clinics, dispensaries	6718 “
Total Non-bedded units	
III Total No of Beds	1,68,323 “



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- IV Quantity of Bio-medical wasted generations 43120.87 kgs
(kg, day)
- V Bio-medical waste generation by bedded 35603.29 kgs
hospital (kg, day)
- VI Bio-medical waste generation by non-bedded 7517.58 kgs
hospital (kg day)
- VII Bio-medical waste treatment and disposal (kg 43120.87 kgs
day)

5. That in the Govt. hospitals/health centers in order to cope with the arising situations, in the General Wards of such hospitals more than one patient are accommodated on a single bed. Thus the total number of admitted patients become much more than the total no of beds in such health organizations.
6. That other than the hospitals, various types of health service facilities are provided to the people requiring indoor bed facilities. Other types of health service centers, which generate Bio-Medical Waste are the as follows:-
- OPD in the Hospitals.
 - MCS in the Hospitals.
 - Mobile Medical Camps.
 - Blood Banks totalling 106 (State Govt. 58, Private 31 and Central Govt. 17)
 - Diagnostic Centers in the State (total number 1521)
 - Veterinary Hospitals (total number 3372 as per CAG Report No. 1 of 2020)
 - Various Health Research Institutions
 - AYUSH Hospitals
7. That other than in-door health services, the out-door health services of various nature also generate huge quantity of Bio-Medical Wastes. Thus it is expected that the generation of bio-medical wastes per day will be much more than the generation and disposal as found and submitted by the State Pollution Control Board. It is, therefore apprehended that the gap in generations and disposal of bio-medical waste finds its way to the gray-market, which is a matter of serious health hazards to the people at large.
8. That the media report has also stated such gap in the whole process, indicating the position that the best practices for disposal of bio-medical waste are not yet followed.



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9. That in respect of the gap between the generation and disposal of Biomedical wastes, the Report of the Comptroller and Auditor General of India on General and Social Sector for the years April 2013 to March 2018, Government of West Bengal Report No. 1 of 2020 (as available from the "public domain"), the Executive Summary, page 10), may be referred, which states as follows:-

"In the Annual Report of 2016, WBPCB understated the quantity of BMW generation (26,859 kg per day) to match the figure of BMW shown as treated (26,859 kg per day) by the CBMWTFs so that no BMW was shown as remaining un-treated in the State. WBPCB was intentionally understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal."

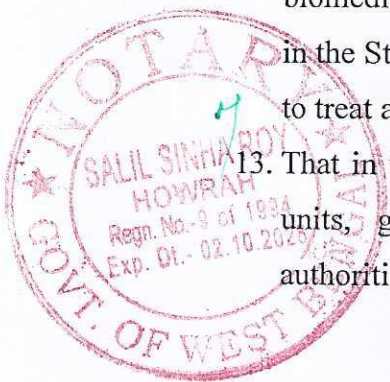
10. That with regard to the understatement of Bio-Medical Waste, the Audit Report of Comptroller and Auditor General, (page 18) as detailed in earlier paragraph, may be reproduced below:

"An Audit analysis of the extent of understatement using average BMW generation figure of 0.231 kg per bed per day showed that BMW generation was understated atleast by 49.52 percent considering bed strength of the State as per H&FW Department data (Appendix 2.3). Thus, the efficacy of the efforts for BMW management was compromised by lack of reliable data. What appeared to be even more worrisome was that the WBPCB was intentionally understating and manipulating the BMW generation figure to make it appear that all generated BMW was being treated before disposal."

11. That inappropriate biomedical waste management may lead to serious health hazards through spreading infections and other diseases and may cause severe environmental problems by polluting the air, soil, ground and surface water. Even there are several media reports that the gap between the biomedical wastes generated and processed goes to the gray market.

12. That in the absence of correct total figures of daily generation and disposal of biomedical wastes, it may be guessed that about 25% to 40% of the total such waste in the State is a major source of various types of diseases, which the doctors may fail to treat appropriately and timely.

13. That in the process of bio-medical generation the concerned CEO of all the health units, generating bio-medical wastes, should submit before the appropriate authorities on affidavit about the total quantity of bio-medical wastes generated in



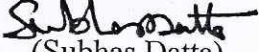
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the unit under his/her control for every quarter.

Regards and best wishes,

Yours Faithfully,


(Subhas Datta)

C.c. To,

1. Principal Secretary,
Health & Family Welfare Deptt.
Govt. of West Bengal,
Swasthya Bhavan,
GN 29, Sector V,
Salt Lake, Calcutta – 700091
2. Principal Secretary,
Public Health & Engineering Deptt.,
Govt. of West Bengal,
NIJALAY, Janaswastha Karigari Bhawan,
Plot No. CN 8, Block CN, Street No. 18,
Sector V, Calcutta – 700091
3. Principal Secretary,
Public Works Department,
Govt. of West Bengal,
Nabanna, 8th Floor,
325, Sarat Chatterjee Road,
Howrah – 711102
4. Principal Secretary,
Environment Department,
Govt. of West Bengal,
5th Floor, Pranisampad Bhawan,
Block, LB II, Sal Lake,
Sector – III, Calcutta – 700106
5. Member Secretary,
West Bengal Pollution Control Board,
Paribesh Bhawan, 10A Block L.A, Sec-III,
Salt Lake, Bidhannagar, Kolkata - 700106
6. Additional Chief Secretary,
Animal Resources Development Department,
Prani Sampad Bhawan,
LB 21, Sector – III,
Salt Lake, Calcutta – 700106
7. Member Secretary,
Central Pollution Control Board,
Parivesh Bhawan,
East Arjun Nagar,
Delhi - 110032



09 DEC 2024

49

EW143684718IN IVR:6987143684718
 SP HOWRAH BPC (711101)
 Counter No:4.14/11/2024.14:00
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 <Dial 18002666868> <Wear Masks, Stay Safe>



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 <Track on www.indiapost.gov.in>
 <Dial 18002666868> <Wear Masks, Stay Safe>



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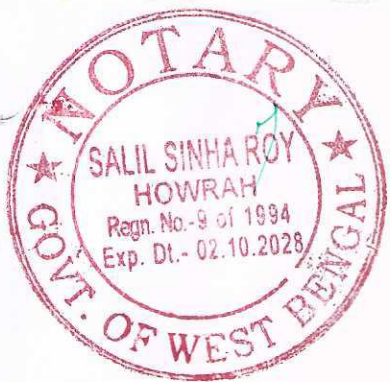
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 <Track on www.indiapost.gov.in>
 <Dial 18002666868> <Wear Masks, Stay Safe>



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