

**BEFORE THE NATIONAL GREEN TRIBUNAL
PRINCIPAL BENCH, NEW DELHI
Appeal No. 35/2025**

IN THE MATTER OF:

Sachin Kumar Baliyan

...Applicant

Vs.

State Level Environment Impact Assessment Authority (SEIAA), Uttar Pradesh
& Ors

...Respondent(s)

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PLACE 13/02/2026
DATE

THROUGH

Shri Narender Pal Singh
ADVOCATE, MoEF&CC

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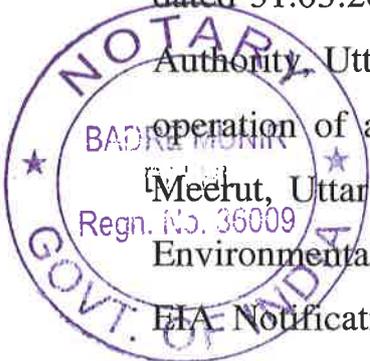
...Respondent(s)

**COUNTER AFFIDAVIT ON BEHALF OF RESPONDENT NO. 6
MINISTRY OF ENVIRONMENT, FOREST AND CLIMATE CHANGE.
MOST RESPECTFULLY SHOWETH:-**

I, Dr. S.Prabhu, currently working as Scientist D at the Ministry of Environment, Forest and Climate Change (MoEF&CC), New Delhi, do hereby solemnly affirm and state as under:

1. That I , in my official capacity in the Ministry of Environment, Forest and Climate Change, in the above mentioned matter, am conversant with the facts and circumstances of the case on the basis of official records, and as such authorized and competent to swear this affidavit.

2. That, the present Appeal is filed challenging the Environmental Clearance dated 31.03.2025 granted by the State Level Environment Impact Assessment Authority, Uttar Pradesh, in favour of Respondent No. 7 for establishment and operation of a Common Bio-Medical Waste Treatment Facility (CBWTF) at Meerut, Uttar Pradesh. The Appellant has, inter alia, submitted that the said Environmental Clearance has been granted in violation of the provisions of the EIA Notification, 2006, asserting that the prescribed procedure was not duly



followed and raising issues including the requirement of public consultation, land-use compatibility, and non-compliance with applicable environmental norms. Further, it has been alleged that Respondent No. 7 has granted EC illegally, in violation of mandated law, issued in contravention of the Bio-Medical Waste Management Rules, 2016 and against the mandated guidelines of minimum land criteria. Also, the land over which the EC for establishment of Common Biomedical Waste Treatment Plant (CBWTF) has been granted/allotted for Hospital purposes and not for any other usage, meaning thereby that any permission granted against the authorities norms is invalid under law.

Applicable provisions for grant of Environmental Clearance

3. That the Ministry has issued an Environmental Impact Assessment Notification vide S.O. 1533(E) dated 14.09.2006 superseding the Environmental Impact Assessment (EIA) Notification, 1994 under the Environment (Protection) Act, 1986. The EIA Notification, 2006 regulates developmental projects in respect of construction of new projects/activities/ expansion or modernization of existing projects in different parts of the country for grant of prior Environmental Clearance.

4. That EIA Notification, 2006 covers 38 projects/activities in its Schedule, which inter alia include different types of infrastructure projects viz. Airports, Ports, Highways, and Building & Construction Projects etc., as specified and classified in the schedule of the said notification. All such projects/activities shall require prior Environmental Clearance from the concerned regulatory authority, e.g., MoEF&CC in the Central Government for matters falling under Category 'A' in the Schedule and the State Environment Impact Assessment Authority (SEIAA) at State level for matters falling under Category 'B' in the said Schedule, before starting any construction work, or preparation of land by the project management except for securing the land. Broadly, the following categories of projects/activities are covered under the ambit of EIA Notification, 2006:



- I. All new projects or activities listed in the Schedule to the said notification;
- II. Expansion and modernization of existing projects or activities listed in the Schedule to the notification with addition of capacity beyond the threshold limits given in the Schedule, after expansion or modernization; and
- III. Any change in product - mix in an existing manufacturing unit included in Schedule beyond the specified range.

5. That the answering respondent has issued a Notification vide S.O.1142 (E) dated 17.04.2015 and made an amendment to the notification dated S.O.1533 (E) dated 14.09.2006 by inserting the item and entries 7(da) in the schedule of the said notification for the Bio-medical Waste Treatment Facilities. Therefore, any expansion of the existing Bio-Medical Waste Plant after 2015 or setting up of a new Bio-Medical Waste Plant would require EC. A true copy of Notification dated 17.04.2015 is marked and annexed herein as **Annexure-R6/1**.

6. That, as per the extant provisions, the Bio-Medical Waste Treatment Facilities are covered under 7(da) of the Schedule to the EIA Notification, 2006 with details as under:

Project or Activity		Category with threshold limit		Conditions if any
		A	B	
(1)	(2)	(3)	(4)	(5)
7	Physical Infrastructure including Environmental Services			
7(da)	Bio-Medical Waste Treatment Facilities	-	All projects	-



7. That the Bio-medical Waste Treatment Facilities fall under category 'B' of the EIA Notification, 2006 and require EC. Such projects are required to be appraised by the State Level Expert Appraisal Committees (SEACs) and approved by the State Level Environment Impact Assessment Authorities (SEIAAs). Further, that as per the EIA Notification, 2006, in the absence of a duly constituted SEIAA/SEAC, category 'B' projects shall be considered at the Central Level as category 'B' projects.

8. That this answering respondent, vide Notification No. S. O. 637(E) dated 28.02.2014, has authorized the SEIAAs, which have been constituted by the Central Government under sub-section (3) of section 3 of the Environment (Protection) Act, 1986 and delegated the powers under the Section 19 of the said Act to take necessary action against the violations, if any. A true copy of the Notification dated 28.02.2014 is marked and annexed herein as **Annexure-R6/2**.

9. It is humbly submitted that the answering respondent, vide Office Memorandum dated 20.03.2019, has issued a clarification regarding the requirement of Environmental Clearance for Common Bio-Medical Waste Treatment Facilities (CBWTFs) under the EIA Notification, 2006. A true copy of the Office Memorandum dated 20.03.2019 is marked and annexed herein as **Annexure-R6/3**.

10. That the Environmental Clearance dated 31.03.2025 was granted by the State Level Environment Impact Assessment Authority (SEIAA), Uttar Pradesh, to the project, 'Existing Common Bio-Medical Waste Treatment Facility' located at Subharti Medical College Campus, Subharti Puram, Meerut, Uttar Pradesh, proposed by M/s Synergy Waste Management Private Limited subject to compliance of specific and general conditions. A true copy of the Environmental Clearance dated 31.03.2025 is marked and annexed herein as **Annexure-R6/4**.

BIO-MEDICAL WASTE MANAGEMENT RULES, 2016



11. It is submitted that the Ministry vide Gazette Notification No. G.S.R 343(E) dated 28th March 2016 had notified the Bio-Medical Waste Management (BMWM) Rules, 2016 in supersession of earlier Rules namely the Bio-Medical Waste (Management & Handling) Rules, 1998 with the objectives to improve segregation, collection, processing, treatment, and disposal of bio-medical waste in an environmentally sound manner, thereby reducing its impact on the environment. The Ministry has also issued three amendments in the BMWM Rules, 2016 vide GSR No. 234(E) dated 16th March 2018; GSR No. 129(E) dated 19th Feb 2019, and 360(E) dated 10th May 2019. Copy of the BMWM Rules, 2016, amended upto date is annexed herein as **Annexure –R6/5**.

12. That, the BMWM Rules, 2016 are uniformly applicable to all persons and institutions involved in the generation and handling of biomedical waste in the country.

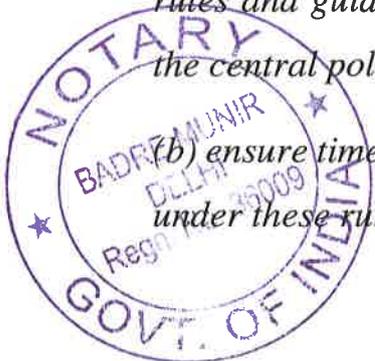
13. That, Rule 3 of the BMWM Rules, 2016 titled 'Definitions' defines 'prescribed authority' as the State Pollution Control Board in respect of a State and Pollution Control Committees in respect of a Union territory;

14. That, Rule 5 of the Bio-Medical Waste Management Rules, 2016 titled as 'Duties of the operator of a common bio-medical waste treatment and disposal facility', mentions that:

"It shall be duty of every operator to:

(a) take all necessary steps to ensure that the bio-medical waste collected from the occupier is transported, handled, stored, treated and disposed of, without any adverse effect to the human health and the environment, in accordance with these rules and guidelines issued by the Central Government or, as the case may be, the central pollution control board from time to time;

(b) ensure timely collection of bio-medical waste from the occupier as prescribed under these rules;



(c) establish bar coding and global positioning system for handling of bio-medical waste in accordance with the guidelines issued by the Central Pollution Control Board by 27th march 2019;

(d) inform the prescribed authority immediately regarding the occupiers which are not handing over the segregated bio medical waste in accordance with these rules;

(e) provide training for all its workers involved in handling of bio-medical waste at the time of induction and at least once a year thereafter;

(f) assist the occupier in training conducted by them for bio-medical waste management;

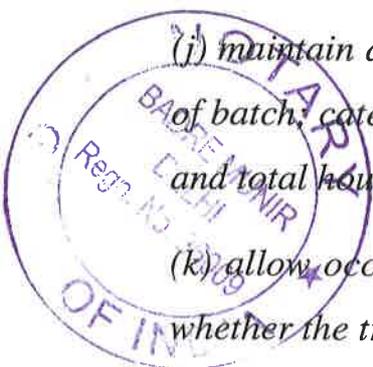
(g) undertake appropriate medical examination at the time of induction and at least once in a year and immunise all its workers involved in handling of bio-medical waste for protection against diseases, including Hepatitis B and Tetanus, that are likely to be transmitted while handling bio medical waste and maintain the records for the same;

(h) ensure occupational safety of all its workers involved in handling of bio-medical waste by providing appropriate and adequate personal protective equipment;

(i) report major accidents including accidents caused by fire hazards, blasts during handling of bio-medical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority and also along with the annual report;

(j) maintain a log book for each of its treatment equipment according to weight of batch, categories of waste treated; time, date and duration of treatment cycle and total hours of operation;

(k) allow occupier, who are giving waste for treatment to the operator, to see whether the treatment is carried out as per the rules;



(l) shall display details of authorisation, treatment, annual report etc on its web-site;

(m) after ensuring treatment by autoclaving or microwaving followed by mutilation or shredding, whichever is applicable, the recyclables from the treated bio-medical wastes such as plastics and glass, shall be given to recyclers having valid consent or authorisation or registration from the respective State Pollution Control Board or Pollution Control Committee;

(n) supply non-chlorinated plastic-coloured bags to the occupier on chargeable basis, if required;

(o) common bio-medical waste treatment facility shall ensure collection of biomedical waste on holidays also;

(p) maintain all record for operation of incineration, hydroor autoclaving for a period of five years; and

(q) upgrade existing incinerators to achieve the standards for retention time in secondary chamber and Dioxin and Furans within two years from the date of this notification

15. That, Rule 6 of the BMW Rules, 2016, titled as 'Duties of Authorities' mentions that the authority specified in column (2) of Scheduled-III shall perform the duties as specified in column (3) thereof in accordance with provisions of these rules.

16. That, Rule 9 of the BMW Rules, 2016 titled as 'Prescribed authority' mentions that the prescribed authority for the implementation of the provisions of these rules shall be the State Pollution Control Boards (SPCBs) in respect of States and Pollution Control Committees (PCCs) in respect of Union territories and that the prescribed authorities shall comply with the responsibilities as stipulated in Schedule III of BMW Rules 2016.



17. That, Rule 7 of the BMW Rules, 2016 titled as 'Treatment and Disposal' mentions that:

“(1) Bio-medical waste shall be treated and disposed of in accordance with Schedule I, and in compliance with the standards provided in Schedule-II by the health care facilities and common bio-medical waste treatment facility.

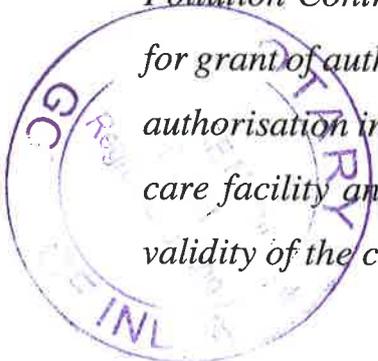
(2) Occupier shall hand over segregated waste as per the Schedule-I to common bio-medical waste treatment facility for treatment, processing and final disposal. Provided that the lab and highly infectious bio-medical waste generated shall be pre-treated by equipment like autoclave or microwave.

(3) No occupier shall establish on-site treatment and disposal facility, if a service of common bio-medical waste treatment facility is available at a distance of seventy-five kilometre.

(4) In cases where service of the common bio-medical waste treatment facility is not available, the Occupiers shall set up requisite biomedical waste treatment equipment like incinerator, autoclave or microwave, shredder prior to commencement of its operation, as per the authorisation given by the prescribed authority....”

17. It is submitted that the Rule 10 of the BMW Rules, 2016 titled as 'Procedure for authorisation' mentions that:

“Every occupier or operator handling bio-medical waste, irrespective of the quantity shall make an application in Form II to the prescribed authority i.e. State Pollution Control Board and Pollution Control Committee, as the case may be, for grant of authorisation and the prescribed authority shall grant the provisional authorisation in Form III and the validity of such authorisation for bedded health care facility and operator of a common facility shall be synchronised with the validity of the consents.



(1) *The authorisation shall be one time for non-bedded occupiers and the authorisation in such cases shall be deemed to have been granted, if not objected by the prescribed authority within a period of ninety days from the date of receipt of duly completed application along with such necessary documents.*

(2) *In case of refusal of renewal, cancellation or suspension of the authorisation by the prescribed authority, the reasons shall be recorded in writing:*

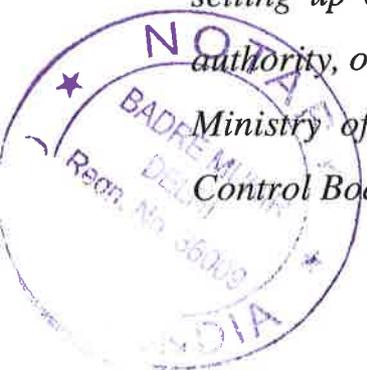
Provided that the prescribed authority shall give an opportunity of being heard to the applicant before such refusal of the authorisation.

(3) *Every application for authorisation shall be disposed of by the prescribed authority within a period of ninety days from the date of receipt of duly completed application along with such necessary documents, failing which it shall be deemed that the authorisation is granted under these rules.*

(4) *In case of any change in the bio-medical waste generation, handling, treatment and disposal for which authorisation was earlier granted, the occupier or operator shall intimate to the prescribed authority about the change or variation in the activity and shall submit a fresh application in Form II for modification of the conditions of authorisation”.*

18. That, Rule 17 of the BMW Rules, 2016 titled as ‘Site for common bio-medical waste treatment and disposal facility’ states that:

“(1) Without prejudice to Rule 5 of these rules, the department in the business allocation of land assignment shall be responsible for providing suitable site for setting up of common biomedical waste treatment and disposal facility in the State Government or Union territory Administration. (2) The selection of site for setting up of such facility shall be made in consultation with the prescribed authority, other stakeholders and in accordance with guidelines published by the Ministry of Environment, Forest and Climate Change or Central Pollution Control Board.”



19. It is submitted that CPCB has issued guidelines for the implementation of BMWM Rules, 2016, and the establishment and operation of Common Bio-medical Treatment and Disposal Facilities.

20. It is submitted that SPCBs and the State Health Departments are the nodal agencies to ensure the enforcement and implementation of BMWM Rules 2016, which include segregation, collection, transportation, and scientific disposal of waste.

21. It is submitted that in view of the foregoing facts and submissions, this Hon'ble Tribunal may be pleased to take the present affidavit on record and pass such other order(s) as may be deemed fit in the interest of justice, which the answering respondent shall duly comply with.

22. The answering Respondent craves liberty to file additional information, if any, till *pendente lite*.


DEPONENT

(डॉ. एस. प्रभु)
(Dr. S. PRABHU)
वैज्ञानिक 'डी'/Scientist 'D'
पर्यावरण, वन एवं जलवायु परिवर्तन मंत्रालय
Min. of Environment, Forest and Climate Change
भारत सरकार, नई दिल्ली
Govt. of India, New Delhi

VERIFICATION

13 FEB 2026

Verified at on this day of _____, 2026 that the contents of this affidavit based on official record(s) maintained and information available in the office are true and correct, no part of it is false and nothing has been concealed there from.


DEPONENT

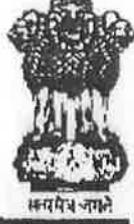
(डॉ. एस. प्रभु)
(Dr. S. PRABHU)
वैज्ञानिक 'डी'/Scientist 'D'
पर्यावरण, वन एवं जलवायु परिवर्तन मंत्रालय
Min. of Environment, Forest and Climate Change
भारत सरकार, नई दिल्ली
Govt. of India, New Delhi

D/759/957
I identify the Dependent who has signed Put T.I. Before me

Identified by
Notarised by
9311010090
CERTIFIED THAT THE DEPONENT has solemnly affirmed before me that the contents of the above which have been read to him/her are true & correct to his/her knowledge
B. ✓
NOTARY DELHI INDIA

13 FEB 2026





भारत का राजपत्र The Gazette of India

असाधारण

EXTRAORDINARY

भाग II—खण्ड 3—उप-खण्ड (ii)

PART II—Section 3—Sub-section (ii)

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

सं. 887]

नई दिल्ली, बृहस्पतिवार, अप्रैल 30, 2015/वैशाख 10, 1937

No. 887]

NEW DELHI, THURSDAY, APRIL 30, 2015 /VAISAKHA 10, 1937

पर्यावरण, वन और जलवायु परिवर्तन मंत्रालय

अधिसूचना

नई दिल्ली, 17 अप्रैल, 2015

का.आ. 1142(अ).— केन्द्रीय सरकार, पर्यावरण (संरक्षण) नियम, 1986 के नियम 5 के उपनियम (4) के साथ पठित पर्यावरण (संरक्षण) अधिनियम, 1986 (1986 का 29) की धारा 3 की उपधारा (1) और धारा 3 की उपधारा (2) के खंड (v) द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए, लोक हित में उक्त नियम के नियम 5 के उपनियम (3) के खंड (क) के अधीन सूचना की आवश्यकता से छूट के पश्चात्, भारत सरकार के पर्यावरण और वन मंत्रालय की अधिसूचना संख्यांक का.आ. 1533(अ), तारीख 14 सितंबर, 2006 का निम्नलिखित और संशोधन करती है, अर्थात्:--

उक्त अधिसूचना की अनुसूची में मद 7(घ) और उससे संबंधित प्रविष्टियों के पश्चात् निम्नलिखित मद और प्रविष्टियां अंतःस्थापित की जाएगी, अर्थात्:--

(1)	(2)	(3)	(4)	(5)
"7(घ)(क)	जैव-चिकित्सा (बायो-मैडिकल) अपशिष्ट उपचार सुविधाएं		सभी परियोजनाएं	

[फा.सं.3-9/2014-आईए.III]

मनोज कुमार सिंह, संयुक्त सचिव

टिप्पण: मूल नियम भारत के राजपत्र, असाधारण, भाग 2, खंड 3, उपखंड (ii) में अधिसूचना सं.का.आ.1533(अ), तारीख 14 सितंबर, 2006 द्वारा प्रकाशित किए गए थे और निम्नानुसार पश्चातवर्ती संशोधन किए गए:--

1. का.आ.1737(अ), तारीख 11 अक्टूबर, 2007;
2. का.आ.3067(अ), तारीख 1 दिसंबर, 2009;
3. का.आ.695(अ), तारीख 4 अप्रैल, 2011;
4. का.आ.2893(अ), तारीख 13 दिसंबर, 2012;

5. का.आ.674(अ), तारीख 13 मार्च, 2013;
6. का.आ.2559(अ), तारीख 22 अगस्त, 2013;
7. का.आ.2731(अ), तारीख 9 सितंबर, 2013;
8. का.आ.562(अ), तारीख 26 फरवरी, 2014
9. का.आ.637(अ), तारीख 28 फरवरी, 2014;
10. का.आ.1599(अ), तारीख 25 जून, 2014;
11. का.आ.2601(अ), तारीख 7 अक्टूबर, 2014;
12. का.आ.3252(अ), तारीख 22 दिसंबर, 2014;
13. का.आ.382(अ), तारीख 3 फरवरी, 2015;
14. का.आ.811(अ), तारीख 23 मार्च, 2015; और
15. का.आ.996(अ), तारीख 10 अप्रैल, 2015।

MINISTRY OF ENVIRONMENT AND FORESTS
NOTIFICATION

New Delhi, the 17th April, 2015

S.O.1142(E).— In exercise of the powers conferred by sub-section (1) and clause (v) of sub-section (2) of section 3 of the Environment (Protection) Act, 1986(29 of 1986) read with sub-rule(4) of rule 5 of the Environment (Protection) Rules, 1986, the Central Government hereby makes the following further amendments to the notification of the Government of India, in the Ministry of Environment and Forests number S.O.1533(E), dated the 14th September, 2006 after dispensed with the requirement of notice under clause(a) of sub-rule(3) of the said rule 5 in public interest, namely:—

In the said notification, in the Schedule, after item 7(d) and the entries relating thereto, the following item and entries shall be inserted, namely:—

(1)	(2)	(3)	(4)	(5)
"7(da)	Bio-Medical Waste Treatment Facilities	-	All projects	-

[F. No. 3-9/2014-IA.III]

MANOJ KUMAR SINGH, Jt. Secy.

Note:- The principal rules were published in the Gazette of India, Extraordinary, Part II, Section 3, Sub-section (ii) *vide* notification number S.O. 1533 (E), dated the 14th September, 2006 and subsequently amended as follows:-

1. S.O.1737(E) dated the 11th October, 2007
2. S.O. 3067(E) dated the 1st December, 2009
3. S.O.695(E) dated the 4th April, 2011
4. S.O.2896(E) dated the 13th December, 2012
5. S.O.674(E) dated the 13th March, 2013
6. S.O.2559(E) dated the 22nd August, 2013
7. S.O. 2731(E) dated the 9th September, 2013
8. S.O. 562(E) dated the 26th February, 2014
9. S.O.637(E) dated the 28th February, 2014
10. S.O. 1599(E) dated the 25th June, 2014
11. S.O. 2601 (E) dated 7th October, 2014
12. S.O. 3252(E) dated 22nd December, 2014
13. S.O. 382 (E) dated 3rd February, 2015
14. S.O. 811(E) dated 23rd March, 2015
15. S.O. 996(E) dated 10th April, 2015.



भारत का राजपत्र The Gazette of India

असाधारण

EXTRAORDINARY

भाग II—खण्ड 3—उप-खण्ड (ii)

PART II—Section 3—Sub-section (ii)

प्राधिकार से प्रकाशित

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No. 545]

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पर्यावरण और वन मंत्रालय

अधिसूचना

नई दिल्ली, 28 फरवरी, 2014

का.आ. 637(अ).—केन्द्रीय सरकार, पर्यावरण (संरक्षण) अधिनियम, 1986 (1986 का 29) की धारा 23 द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए उक्त अधिनियम की धारा 5 के अधीन इसमें निहित शक्तियों को पर्यावरण (संरक्षण) अधिनियम, 1986 की धारा 3 की उप-धारा (3) के अधीन केन्द्रीय सरकार द्वारा गठित किए गए सभी राज्य और संघराज्यक्षेत्र पर्यावरण समाघात प्राधिकरणों (जिन्हें इसमें इसके पश्चात् उक्त प्राधिकरण कहा गया है) को उक्त प्राधिकरणों द्वारा अपनी अधिकारिता के भीतर परियोजनाओं या क्रिया कलापों को जारी पर्यावरण अनापत्तियों की शर्तों के अतिक्रमण की दशा में परियोजना प्रस्तावकों को कारण बताओ नोटिस जारी करने तथा इस शर्त के अधीन कि केन्द्रीय सरकार शक्तियों के ऐसे प्रत्यायोजन का प्रतिसंहरण कर सकेगी या उक्त अधिनियम की धारा 5 के उपबंधों को स्वयं अवलंब ले सकेगी, यदि केन्द्रीय सरकार की राय में लोक हित में ऐसी कार्यवाही आवश्यक है, यदि अपेक्षित हो तो अतिक्रमणों के लिए उक्त परियोजना प्रस्तावकों को ऐसी पर्यावरण अनापत्तियों को उन्हें प्रास्थगित रखने या वापस लिए जाने हेतु निर्देश जारी करने की शक्तियों का प्रत्यायोजन करती है।

[सं. जे-11013/2/2013-आई ए (आई)]

अजय त्यागी, संयुक्त सचिव

MINISTRY OF ENVIRONMENT AND FORESTS

NOTIFICATION

New Delhi, the 28th February, 2014

S.O. 637(E).—In exercise of the powers conferred by section 23 of the Environment (Protection) Act, 1986 (29 of 1986), the Central Government hereby delegates the powers vested in it under section 5 of the said Act to all the State and Union Territory Environment Impact Assessment Authorities (Hereinafter referred to as the said Authorities) constituted by the Central Government under sub-section (3) of section 3 of Environment (Protection) Act, 1986, to issue show cause notice to project proponents in case of violation of the conditions of the environment clearances issued by the said Authorities to projects or activities within their jurisdiction and to issue directions to the said project proponents for keeping such environment clearances in abeyance or withdrawing them, if required, for violations, subject to the condition that the Central Government may revoke such delegations of powers or may itself invoke the provisions of section 5 of the said Act, if in the opinion of the Central Government such a Course of action is necessary in the public interest.

[No. J-11013/2/2013-IA. (I)]

AJAY TYAGI, Jr. Secy.

अधिसूचना

नई दिल्ली, 28 फरवरी, 2014

का.आ. 638(अ).—केंद्रीय सरकार, पर्यावरण (संरक्षण) अधिनियम, 1986 (1986 का 29) की धारा 19 के खण्ड (क) द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए उक्त की धारा के प्रयोजन के लिए इससे उपाबद्ध उस सारणी के स्तंभ (3) में उनमें से प्रत्येक के सामने उल्लिखित अधिकारिता के साथ उस सारणी के स्तंभ (2) में उल्लिखित प्राधिकरण या अधिकारी को प्रातिकृत करती है:

सारणी

क्रम संख्यांक	प्राधिकरण/अधिकारी	अधिकारिता
(1)	(2)	(3)
1.	पर्यावरण (संरक्षण) अधिनियम, 1986 की धारा 3 की उपधारा (3) के अधीन केंद्रीय सरकार द्वारा गठित राज्य या संघ राज्यक्षेत्र स्तर पर्यावरण समाघात प्राधिकरण (एस.ई.आई.ए.ए.)	संपूर्ण राज्य या संघ राज्यक्षेत्र
2.	पर्यावरण और वन मंत्रालय (एम.ओ.ई.एफ.) के किन्हीं प्रादेशिक कार्यालयों में तैनात कोई निदेशक, वन संरक्षक या अपर प्रधान मुख्य वन संरक्षक	पर्यावरण और वन मंत्रालय द्वारा यथा-विनिश्चित प्रादेशिक कार्यालय की अधिकारिता

[सं. जे-11013/2/2013-आई ए (आई)]

अजय त्यागी, संयुक्त सचिव

NOTIFICATION

New Delhi, the 28th February, 2014

S.O. 638(E).—In exercise of the powers conferred by clause (a) of section 19 of the Environment (Protection) Act, 1986 (29 of 1986), the Central Government hereby authorises the Authority or officer mentioned in column (2) of the Table hereto for the purpose of the said section with the jurisdiction mentioned against each of them in column (3) of that Table:

TABLE

S. No.	Authority/Officer	Jurisdiction
(1)	(2)	(3)
1.	State or Union Territory level Environment Impact Assessment Authority (SEIAA) constituted by the Central Government under sub-section (3) of section 3 of the Environment (Protection) Act, 1986.	Whole of State or Union Territory
2.	Any Director, Conservator of Forests or Additional Principal Chief Conservator of Forests Posted in any of the Regional Offices of the Ministry of Environment and Forests (MoEF).	Jurisdiction of the Regional Office as decided by the Ministry of Environment and Forests

[No. J-11013/2/2013-IA. (I)]

AJAY TYAGI, Jt. Secy.

Indira Paryavaran Bhawan
Aliganj, Jorbagh Road
New Delhi-110 003

Dated: 20th March, 2019

OFFICE MEMORANDUM

Sub.: Clarification of requirement of Environmental Clearance by Common Bio-medical Waste Treatment Facilities (CBWTF) as per EIA Notification 2006 – reg.

An OM from HSM Division dated 28.02.2019 has been received requesting clarification of requirement of Environmental Clearance by Common Bio-medical Waste Treatment Facilities (CBWTF) as per EIA Notification 2006. It is to inform that the CBWTF require prior EC and are appraised as per the provisions of schedule 7(da) of the EIA Notification 2006 as amended from time to time.

2. As per the EIA Notification 2006, expansion and modernization of existing projects or activities listed in the Schedule to this notification with addition of capacity beyond the limits specified for the concerned sector, that is, projects or activities which cross the threshold limits given in the Schedule, after expansion or modernization require EC.

3. It is also informed that as per para 7(ii) of the EIA Notification 2006 all applications seeking prior environmental clearance for expansion with increase in the production capacity beyond the capacity for which prior environmental clearance has been granted under this notification or with increase in either lease area or production capacity in the case of mining projects or for the modernization of an existing unit with increase in the total production capacity beyond the threshold limit prescribed in the Schedule to this notification through change in process and or technology or involving a change in the product mix shall be made in Form I and they shall be considered by the concerned Expert Appraisal Committee or State Level Expert Appraisal Committee within sixty days, who will decide on the due diligence necessary including preparation of EIA and public consultations and the application shall be appraised accordingly for grant of environmental clearance.

4. This issues with the approval of the competent authority.

Sharath Kumar Pallerla
22/3/19

(Sharath Kumar Pallerla)
Director, IA Policy Division

To,

Sh. Aditya Narayan Singh,
Additional Director, HSM Division,
Ministry of Environment, Forest and Climate Change,
Indira Paryavaran Bhawan Aliganj,
Jorbagh Road New Delhi-110 003.

OK
Issued
22/3/19



569

File No: 9679-7761

Government of India

Ministry of Environment, Forest and Climate Change

(Issued by the State Environment Impact Assessment Authority (SEIAA),
UTTAR PRADESH)

Annexure - R6/4 16



Date 31/03/2025



To,

Shri Neeraj Aggarwal
M/s SYNERGY WASTE MANAGEMENT PRIVATE LIMITED
517-518, 5th Floor, D-Mall, Sector-10, Rohini, New Delhi, 110085, Sector-10, NORTH WEST, DELHI,
110085
info@synergyworld.co.in

Subject:

Grant of prior Environmental Clearance (EC) to the proposed project under the provision of the EIA Notification 2006 -regarding Existing Common Bio-Medical Waste Treatment Facility” at Subharti Medical College Campus, Subharti Puram, Meerut, Uttar Pradesh, M/s Synergy Waste Management Pvt. Ltd.

Sir/Madam,

This is in reference to your application submitted to SEIAA vide proposal number SIA/UP/INFRA2/522886/2025 dated 07/02/2025 for grant of prior Environmental Clearance (EC) to the proposed project under the provision of the EIA Notification 2006 and as amended thereof.

2. The particulars of the proposal are as below :

(i) EC Identification No.	EC25B3301UP5147670N
(ii) File No.	9679-7761
(iii) Clearance Type	Fresh EC
(iv) Category	B1
(v) Project/Activity Included Schedule No.	7(da) Bio-Medical Waste Treatment Facilities Existing Common Bio-Medical Waste Treatment Facility at Subharti Medical College Campus, Subharti Puram, Meerut, Uttar Pradesh
(vii) Name of Project	SYNERGY WASTE MANAGEMENT PRIVATE LIMITED
(viii) Name of Company/Organization	MEERUT, UTTAR PRADESH
(ix) Location of Project (District, State)	SEIAA
(x) Issuing Authority	No
(xi) Applicability of General Conditions as per EIA Notification, 2006	

3. In view of the particulars given in the Para 1 above, the project proposal interalia including Form-2(Part A, B and C)/

EIA & EMP Reports were submitted to the SEAC for appraisal under the provision of EIA notification 2006 and its subsequent amendments. 4. The above-mentioned proposal has been considered by SEAC in its meeting held on 07-03-2025. The minutes of the meeting and all the project documents are available on PARIVESH portal which can be accessed from the PARIVESH portal by scanning the QR Code above.

5. Details of the minerals to be mined along with production capacity and the brief on the salient features of the project as submitted by the project proponent in Form I (Part A and B) in the reports and as presented during SEAC meeting are annexed to this EC as Annexure (2).

6. The SEAC, in its meeting held on 07-03-2025 based on information submitted viz: Form I (Part A, B and C), EIA/EMP report etc & clarifications provided by the project proponent and after detailed deliberations on all technical aspects and public hearing issues and compliance thereto furnished by the Project Proponent, recommended the proposal for grant of Environment Clearance under the provision of EIA Notification, 2006 and as amended thereof subject to stipulation of Specific and Standard EC conditions as given in Annexure (1).

7. The SEIAA in its meeting held on 27-03-2025 has examined the proposal in accordance with the provisions contained in the Environment Impact Assessment (EIA) Notification, 2006 & further amendments thereto and based on the recommendations of the SEIAA hereby accords Environment Clearance for the instant proposal to Neeraj Aggarwal under the provisions of EIA Notification, 2006 and as amended thereof subject to compliance of the Specific conditions as given in Annexure (1)

8. The SEIAA reserves the right to stipulate additional conditions, if found necessary.

9. The Environmental Clearance to the aforementioned project is under provisions of EIA Notification, 2006. It does not tantamount to approvals/consent/permissions etc. required to be obtained under any other Act/Rule/regulation. The Project Proponent is under obligation to obtain approvals /clearances under any other Acts/ Regulations or Statutes, as applicable, to the project.

10. The PP is under obligation to implement commitments made in the Environment Management Plan, which forms part of this EC.

11. General Instructions:

a) The project proponent shall prominently advertise it at least in two local newspapers of the District or State, of which one shall be in the vernacular language within seven days indicating that the project has been accorded environment clearance and the details of SEIAA website where it is displayed.

b) The copies of the environmental clearance shall be submitted by the project proponents to the Heads of local bodies, Panchayats and Municipal Bodies in addition to the relevant offices of the Government who in turn must display the same for 30 days from the date of receipt.

c) The project proponent shall have a well laid down environmental policy duly approved by the Board of Directors (in case of Company) or competent authority, duly prescribing standard operating procedures to have proper checks and balances and to bring into focus any infringements/deviation/violation of the environmental / forest / wildlife norms / conditions.

d) Action plan for implementing EMP and environmental conditions along with responsibility matrix of the project proponent (during construction phase) and authorized entity mandated with compliance of conditions (during operational phase) shall be prepared. The year wise funds earmarked for environmental protection measures shall be kept in separate account and not to be diverted for any other purpose. Six monthly progress of implementation of action plan shall be reported to the Ministry/Regional Office along with the Six-Monthly Compliance Report.

e) Concealing factual data or submission of false/fabricated data may result in revocation of this environmental clearance and attract action under the provisions of Environment (Protection) Act, 1986.

f) The project proponent shall also ensure that the proposed site is not a part of any no-development zone as required/prescribed/identified under law. In case of violation, this permission shall automatically deem to be cancelled. Also, in the event of any dispute on ownership or land use of the proposed site, this clearance shall automatically deem to be cancelled.

g) Any appeal against this EC shall lie with the National Green Tribunal, if preferred, within a period of 30 days as prescribed under Section 16 of the National Green Tribunal Act, 2010.

h) The SEIAA reserves the right to revoke the environmental clearance, if conditions stipulated are not implemented to the satisfaction of SEIAA. SEIAA may impose additional environmental conditions or modify the existing ones, if necessary.

12. This issues with the approval of the Competent Authority

Specific EC Conditions for (Bio-medical Waste Treatment Facilities)

1. Environmental Attributes

S. No	EC Conditions
1.1	<ol style="list-style-type: none"> 1. Project proponent should ensure to develop 1500 sqm green belt nearby the existing plant of Synergy Biomedical Waste Treatment Facility. 2. The observations provided in the vetting recommendation letter dated 03/03/2025 issued by the Civil Engineering Department, Motilal Nehru National Institute of Technology, Allahabad will be strictly followed by the project proponent. 3. Proponent shall comply with the action plan for CER submitted by PP at the time of EIA presentation. Compliance report of investment under CER to be submitted regularly to the Directorate, UPPCB and District Administration. 4. Proposed CBWTF shall comply with the guidelines for Bio-medical Waste Treatment and Disposal, transportation & storage facilities etc. issued by CPCB from time to time.
1.2	<ol style="list-style-type: none"> 1. The fixed hearth type incinerator capacity 300 kg/hr is used and is operational in the project as mentioned in EIA report. For 300 kg/hr capacity, the Rotary Kiln type incinerator may be used in place of fixed hearth type incinerator in EIA report as per CPCB Guideline 2016. (For higher capacity incinerators (i.e., 250 kg/hour or more), rotary kiln-based incinerators are preferred over fixed hearth incinerators. Rotary Kiln shall be preferred; in case of the total biomedical waste treated in a batch (8 hour) is exceeding 2.5 to 3 Tones as per CPCB Guideline 2016.) 2. The Autoclave [300 lit/batch] temperature is to be maintained at more than 121°C at pressure of 15 pounds per square inch (psi) and the residence time will be more than 1 hour as per CPCB Guideline 2016. 3. The Shredder [300 kg/hr.] used for de-shaping or cutting into smaller pieces to make it unrecognizable waste as per Guideline 2016 & BMW Rules, 2016. 4. The air pollution controlling equipments should be as per the prescribed BMW Rules, 2016 5. The Effluent Treatment Plant of 5 KLD capacity comprises of collection tank, O&G trap, chemical dosing cum mixing (Flash and slow), coagulation chamber, primary settling tank, biological treatment process, secondary settling tank, pressure filter, activated carbon filter, pH correction tank to comply with the water recirculation process. The treated effluent is to be recycled for vehicle cleaning and scrubbing cum quenching purpose in air pollution control device of the incinerator as per the Guideline. 6. In light of letter dated 27/3/2025 Commitment of Subharti Medical University for land allotment should be submitted within 03 months failing which this EC is liable to be revoked. 7. Zero Liquid Discharge system (ZLD) should be maintained as proposed. 8. The emissions of the parameters Hcl, SO₂, CO, total Organic Carbon, HF, NO_x, total Dioxins and Furans, Hg and its compounds shall be strictly per Environment (Protection) Rules 1986 as amended. The CO₂ concentration in tail gas shall not be less than 7%. Secondary combustion chamber of Incinerator's minimum temperature will be 1100 degree centigrade with gas residence time not less than 2 seconds. 9. As part of CER activities the project proponent shall conduct awareness camps and workshops in nearby habitations regarding maintenance of personal as well as community hygiene. First aid training should be given to school students in the vicinity of hospital. Details of such workshops shall be uploaded on the website of project and also submitted to SEIAA.

Standard EC Conditions for (Bio-Medical Waste Treatment Facilities)

1. Statutory Compliance

S. No	EC Conditions
1.1	The project proponent shall obtain forest clearance under the provisions of Forest (Conservation) Act, 1980, in case of the diversion of forest land for non-forest purpose involved in the project.
1.2	The project proponent shall obtain clearance from the National Board for Wildlife, if applicable.
1.3	The project proponent shall prepare a Site-Specific Conservation Plan & Wildlife Management Plan and approved by the Chief Wildlife Warden. The recommendations of the approved Site-Specific Conservation Plan/Wildlife Management Plan shall be implemented in consultation with the State Forest Department. The implementation report shall be furnished along with the six-monthly compliance report (in case of the presence of schedule-I species in the study area)
1.4	The project proponent shall obtain Consent to Establish / Operate under the provisions of Air (Prevention & Control of Pollution) Act, 1981 and the Water (Prevention & Control of Pollution) Act, 1974 from the concerned State Pollution Control Board/ Committee.
1.5	Transportation and handling of Bio-medical Wastes shall be as per the Bio-Medical Waste Management Rules, 2016 including the section 129 to 137 of Central Motor Vehicle Rules 1989.
1.6	Project shall fulfill all the provisions of Hazardous and Other Wastes (Management and Transboundary Movement) Rules, 2016 including collection and transportation design etc. and also guidelines for Common Hazardous Waste Incineration - 2005, issued by CPCB Guidelines of CPCB/MPPCB for Bio-medical Waste Common Hazardous Wastes incinerators shall be followed.
1.7	The project proponent shall obtain the necessary permission from the Central Ground Water Authority, in case of drawl of ground water / from the competent authority concerned in case of drawl of surface water required for the project.
1.8	A certificate of adequacy of available power from the agency supplying power to the project along with the load allowed for the project should be obtained.
1.9	All other statutory clearances such as the approvals for storage of diesel from Chief Controller of Explosives, Fire Department, Civil Aviation Department shall be obtained, as applicable by project proponents from the respective competent authorities

2. Air Quality Monitoring And Preservation

S. No	EC Conditions
2.1	The project proponent shall install emission monitoring system including Dioxin and furans to monitor stack emission with respect to standards prescribed in Environment (Protection) Rules 1986 and connected to SPCB and CPCB online servers and calibrate these systems from time to time according to equipment supplier specification through labs recognised under Environment (Protection) Act, 1986 or NABL accredited laboratories.
2.2	Periodical air quality monitoring in and around the site including VOC, HC shall be carried out.

S. No	EC Conditions
2.3	Incineration plants shall be operated (combustion chambers) with such temperature, retention time and turbulence, so as to achieve Total Organic Carbon (TOC) content in the slag and bottom ashes less than 3%, or their loss on ignition is less than 5% of the dry weight of the material.
2.4	Venturi scrubber (alkaline) should be provided with the incinerator with stack of adequate height (Minimum 30 meters) to control particulate emission within 50mg/Nm ³ .
2.5	Appropriate Air Pollution Control (APC) system shall be provided for fugitive dust from all vulnerable sources, so as to comply prescribed standards. All necessary air pollution control devices (quenching, Venturi scrubber, mist eliminator) should be provided for compliance of emission standards.
2.6	Masking agents should be used for odour control.

3. Water Quality Monitoring And Preservation

S. No	EC Conditions
3.1	The project proponent shall install effluent monitoring system with respect to standards prescribed in Environment (Protection) Rules 1986 through labs recognised under Environment (Protection) Act, 1986 or NABL accredited laboratories.
3.2	Waste water generated from the facility shall be treated in the ETP and treated waste water shall be reused in the APCD connected to the incinerator. The water quality of treated effluent shall meet the norms prescribed by State Pollution Control Board. Zero discharge should be maintained.
3.3	Process effluent/any waste water should not be allowed to mix with storm water.
3.4	Total fresh water use shall not exceed the proposed requirement as provided in the project details. Prior permission from competent authority shall be obtained for use of fresh water.
3.5	Sewage Treatment Plant shall be provided to treat the wastewater generated from the project. Treated water shall be reused within the project.
3.6	A certificate from the competent authority for discharging treated effluent/ untreated effluents into the Public sewer/disposal/drainage systems along with the final disposal point should be obtained.
3.7	The leachate from the facility shall be collected and treated to meet the prescribed standards before disposal.
3.8	Magnetic flow meters shall be provided at the inlet and outlet of the ETP & all ground water abstraction points and records for the same shall be maintained regularly.
3.9	Rain water runoff from hazardous waste storage area shall be collected and treated in the effluent treatment plant.

4. Noise Monitoring And Prevention

S. No	EC Conditions
4.1	The ambient noise levels should conform to the standards prescribed under E(P)A Rules, 1986 viz. 75 dB(A) during day time and 70 dB(A) during night time.

5. Energy Conservation Measures

S. No	EC Conditions
5.1	Provide solar power generation on roof tops of buildings, for solar light system for all common areas, street lights, parking around project area and maintain the same regularly;
5.2	Provide LED lights in their offices and residential areas

6. Waste Management

S. No	EC Conditions
6.1	Incinerated ash shall be disposed at approved TSDF and MoU made in this regard shall be submitted to the Ministry prior to the commencement.
6.2	The solid wastes shall be segregated as per the norms of the Solid Waste Management Rules, 2016.
6.3	A certificate from the competent authority handling municipal solid wastes should be obtained, indicating the existing civic capacities of handling and their adequacy to cater to the M.S.W. generated from project.
6.4	Any wastes from construction and demolition activities related thereto shall be managed so as to strictly conform to the Construction and Demolition Waste Management Rules, 2016
6.5	No landfill site is allowed within the CBWTF site
6.6	The Project proponent shall not store the Hazardous Wastes more than the quantity that has been permitted by the CPCB/SPCB.

7. Green Belt

S. No	EC Conditions
7.1	Green belt shall be developed in area as provided in project details, with native tree Green belt shall be developed in an area equal to 33% of the plant area with a native tree species in accordance with CPCB guidelines. The greenbelt shall inter alia cover the entire periphery of the plant.

8. Public Hearing And Human Health Issues

S. No	EC Conditions
8.1	Feeding of materials/Bio-medical waste should be mechanized and automatic no manual feeding is permitted.

S. No	EC Conditions
8.2	Proper parking facility should be provided for employees & transport used for collection & disposal of waste materials.
8.3	Necessary provision shall be made for fire-fighting facilities within the complex.
8.4	Emergency preparedness plan based on the Hazard identification and Risk Assessment (HIRA) and Disaster Management Plan shall be implemented.
8.5	Emergency plan shall be drawn in consultation with SPCB/CPCB and implemented in order to minimize the hazards to human health or environment from fires, explosion or any unplanned sudden or gradual release of hazardous waste or hazardous waste constituents to air, soil or surface water.
8.6	Provision shall be made for the housing of construction labour within the site with all necessary infrastructure and facilities such as fuel for cooking, mobile toilets, mobile STP, safe drinking water, medical health care, crèche etc. The housing may be in the form of temporary structures to be removed after the completion of the project.
8.7	Occupational health surveillance of the workers shall be done on a regular basis.

9. Miscellaneous

S. No	EC Conditions
9.1	The project proponent shall prominently advertise it at least in two local newspapers of the District or State, of which one shall be in the vernacular language within seven days indicating that the project has been accorded environment clearance and the details of MoEF&CC/SEIAA website where it is displayed
9.2	The copies of the environmental clearance shall be submitted by the project proponents to the Heads of local bodies, Panchayats and Municipal Bodies in addition to the relevant offices of the Government who in turn has to display the same for 30 days from the date of receipt.
9.3	The project proponent shall upload the status of compliance of the stipulated environment clearance conditions, including results of monitored data on their website and update the same on half-yearly basis.
9.4	The project proponent shall submit six-monthly reports on the status of the compliance of the stipulated environmental conditions on the website of the ministry of Environment, Forest and Climate Change at environment clearance portal.
9.5	The company shall have a well laid down environmental policy duly approved by the Board of Directors. The environmental policy should prescribe for standard operating procedures to have proper checks and balances and to bring into focus any infringements/deviation/violation of the environmental/forest/wildlife norms/conditions. The company shall have defined system of reporting infringements/deviation/violation of the environmental/forest/wildlife norms/ conditions and / or shareholder's/stake holders. The copy of the board resolution in this regard shall be submitted to the MoEF&CC as a part of six-monthly report.

S. No	EC Conditions
9.6	A separate Environmental Cell both at the project and company head quarter level, with qualified personnel shall be set up under the control of senior Executive, who will directly report to the head of the organization.
9.7	Action plan for implementing EMP and environmental conditions along with responsibility matrix of the company shall be prepared and shall be duly approved by competent authority. The year wise funds earmarked for environmental protection measures shall be kept in separate account and not to be diverted for any other purpose. Year wise progress of implementation of action plan shall be reported to the Ministry/Regional Office along with the Six Monthly Compliance Report.
9.8	Self-environmental audit shall be conducted annually. Every three years third party environmental audit shall be carried out.
9.9	The project proponent shall submit the environmental statement for each financial year in Form-V to the concerned State Pollution Control Board as prescribed under the Environment (Protection) Rules, 1986, as amended subsequently and put on the website of the company.
9.10	The criteria pollutant levels namely; PM2.5, PM10, SO2, NOx (ambient levels as well as stack emissions) or critical sectoral parameters, indicated for the project shall be monitored and displayed at a convenient location near the main gate of the company in the public domain.
9.11	The project proponent shall inform the Regional Office as well as the Ministry, the date of financial closure and final approval of the project by the concerned authorities, commencing the land development work and start of production operation by the project.
9.12	The project authorities must strictly adhere to the stipulations made by the State Pollution Control Board and the State Government.
9.13	The project proponent shall abide by all the commitments and recommendations made in the EIA/EMP report, commitment made during Public Hearing and also that during their presentation to the Expert Appraisal Committee.
9.14	No further expansion or modifications in the plant shall be carried out without prior approval of the Ministry of Environment, Forests and Climate Change (MoEF&CC).
9.15	Concealing factual data or submission of false/fabricated data may result in revocation of this environmental clearance and attract action under the provisions of Environment (Protection) Act, 1986.
9.16	The Ministry may revoke or suspend the clearance, if implementation of any of the above conditions is not satisfactory.
9.17	The Ministry reserves the right to stipulate additional conditions if found necessary. The Company in a time bound manner shall implement these conditions.
9.18	The Regional Office of this Ministry shall monitor compliance of the stipulated conditions. The project authorities should extend full cooperation to the officer (s) of the Regional Office by furnishing the requisite data/information/monitoring reports.
9.19	The above conditions shall be enforced, inter-alia under the provisions of the Water (Prevention &

S. No	EC Conditions
	Control of Pollution) Act, 1974, the Air (Prevention & Control of Pollution) Act, 1981, the Environment (Protection) Act, 1986, Hazardous and Other Wastes (Management and Transboundary Movement) Rules, 2016 and the Public Liability Insurance Act, 1991 along with their amendments and Rules and any other orders passed by the Hon'ble Supreme Court of India / High Courts/NGT and any other Court of Law relating to the subject matter.
9.20	Any appeal against this EC shall lie with the National Green Tribunal, if preferred, within a period of 30 days as prescribed under Section 16 of the National Green Tribunal Act, 2010.

10. Specific Conditions

S. No	EC Conditions
10.1	The project proponent shall ensure 70% of the employment to the local people, as per the applicable law. The project proponent shall set up a skill development center/provide skill development training to village people.

Annexure-2

A presentation was made by the project proponent along with their consultant M/s Ind Tech House Consult to SEAC on 07/03/2025.

Project Details Informed by the project proponent and their consultant

1. The environmental clearance is sought for "Existing Common Bio-Medical Waste Treatment Facility" at Subharti Medical College Campus, Subharti Puram, Meerut, Uttar Pradesh, M/s Synergy Waste Management Pvt. Ltd.
2. The terms of reference for the project proposal was issued by SEIAA, U.P. vide letter no. 381/Parya/SEIAA/7761/2023 dated 18/01/2024 for the Captive Treatment Facility.
3. Amendment terms of reference letter was issued by SEIAA, U.P. vide letter dated 21/10/2024 for the Existing Common Bio-Medical Waste Treatment Facility.
4. Salient features of the project as submitted by the project proponent:

SN	Parameters	Description
1.	Identification of project	Project falls under Category "B" of item 7 (da) as per EIA Notification dated 14th September, 2006 & amendments thereof. However, this plant requires Post-Facto EC Approval as per NGT order dated 02.03.2023
2.	Project Location	Subharti Medical College Campus, Subharti Puram, Meerut, UP - 250 005 Site coordinates - 28°57'46.02" N, 77° 37'58.64"E
3.	Existing Plant capacity	Incinerator [capacity 300 Kg/hour] Autoclave [capacity – 300 Lit/batch] Shredder [capacity - 300 kg/hour]
4.	Plot Area	1242 sq m
5.	Land Ownership	Land allocated by the Medical College Authority on rent basis.
6.	Water requirement	Fresh water requirement – 5 KLD Total water requirement including recycled treated waste water from onsite ETP - 9 KLD
7.	Source of water	Fresh water source – Onsite ground water abstraction through tube-well. Necessary permission has been obtained. Recycled water source: Onsite ETP treated wastewater.
8.	Wastewater	Wastewater is generated from equipment washing, floor washing, vehicle washing operations etc. and treated in onsite effluent treatment plant of capacity 5 KLD.
9.	Man Power	At present, total 113 employees [direct 62 including vehicle helpers + staff + 51 contractual drivers] are engaged with the operational activities of the facility.
10.	Power Requirement	Power Requirement: 49 KW Source: UP Power Corporation Limited Emergency backup – one DG set of 62.5 KVA
11.	Waste carrying vehicles [GPS enabled]	51 nos.
12.	Green Area	As the allocated area is very small, no green area could be developed within the premises. However, the PP has submitted an undertaking to develop green area of 1500 sqm on a separate land nearby the existing facility.

18.	Total Project Cost	Project cost is INR. 94.71 Lakh.
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5. Land use details:

Component	Area, (in m ²)	Percentage (%)
Incinerator area	218.9	17.6
Penal Room	12.0	1.0
Shredder Area	11.9	1.0
Red Waste room	11.9	1.0
Autoclave Area	55.8	4.5
Chimney	9.8	0.8
Ash Storage Room	9.1	0.7
Yellow Waste Store Room	13.3	1.1
Vehicle Washing Area	20.5	1.7
Septic Tank	2.2	0.2
DG Set	33.7	2.7
ETP Area	50.1	4.0
Office	23.7	1.9
Office	16.6	1.3
Store Room	14.2	1.1
Wash Room	7.2	0.6
Fire Fighting Water tank	47.7	3.8
Store	1.5	0.1
Road/ Other open area/ services	681.9	54.9
Total Plant Area	1242.0	100.0

6. Proposed activity:

S.N.	Activities
1.	Collection of biomedical wastes from different Health Care units [HCU]
2.	Transportation of segregated wastes from HCUs to Project Site
3.	Segregated waste storage at site as per color coded bags
4.	Operation of Incinerator
5.	Operation of Autoclave
6.	Operation of Shredder
7.	Handling of Sharps
8.	Vehicle Cleaning
9.	Operation of ETP and recycling of treated effluent
10.	Storage & disposal of hazardous waste [ETP sludge and incineration ash]
11.	Site Security and Fire Safety

7. Water requirement details:

Usage	Source	Water Quantity [KLD]	Effluent [KLD]	Treatment
Domestic requirement [11@45 lpcd]	Fresh – onsite tubewell	0.5	0.3	Sewer line of Subharti Medical College Campus.
Floor Washing	Fresh	1	0.9	ETP
Quencher and Scrubber	Recycled – Onsite ETP	1.5	1	ETP
Vehicle Cleaning	Onsite ETP	2.5	2.3	ETP
Green area outside	Fresh	3.5	0	--
Total Water Required		9 KLD		

Head	Source	Quantity
Fresh Water Requirement	On site Tube Well	5KLD
Treated Water Requirement	On site ETP	4 KLD
Total water Requirement		9 KLD

8. Solid & other waste details:

- MSW of around 1.6 Kg/day will be generated from workers which is disposed through municipal waste disposal system of the Medical College.

SN	Type of waste	Category as per HW Rule 2016	Quantity	Storage	Disposal
1.	Used Oil	Sch.I, 5.1	0.1 KL/year	Stored in HDPE drums	Sale to registered recycler
2.	Ash from incinerator and flue gas cleaning residue	Sch.I, 35.1, 37.2	120 kg/day	Stored onsite at secured place	Through Common HWTSDF
3.	ETP sludge	Sch.I, 35.3	5.1 Kg/day	Stored onsite at secured place	

9. The project proposal falls under category-7(da) of EIA Notification, 2006 (as amended).

Copy, through email, for information and necessary action to –

- Principal Secretary, Department of Environment, Forest and Climate Change, Government of Uttar Pradesh, Lucknow (email – psforest2015@gmail.com)
- Joint Secretary, Ministry of Environment, Forest and Climate Change, Government of India, 3rd Floor, Prithvi-Block, Indira Paryavaran Bhawan, Jor Bagh Road, New Delhi-110003 (email – sudheer.ch@gov.in)
- Deputy Director General of Forests (C), Integrated Regional Office, Ministry of Environment, Forest and Climate Change, Kendriya Bhawan, 5th Floor, Sector "H", Aliganj, Lucknow – 226020 (email – rocz.lko-mef@nic.in)
- District Magistrate, Meerut.
- Member Secretary, Uttar Pradesh Pollution Control Board, TC-12V, Paryavaran Bhawan, Vibhuti Khand, Gomti Nagar, Lucknow-226010 (email – ms@uppcb.in)
- Copy for Guard File.

(Ajay Kumar Sharma)
Member Secretary, SEIAA

Signature Not Verified

Digitally Signed by: Mr Ajay Kumar Sharma
Member Secretary, SEIAA

Date: 31/03/2025

The Bio-Medical Waste Management Rules, 2016¹ (Bio-Medical Waste Management Rules, 2016)

[As amended upto G.S.R. 129(E), dt. 19-8-2019]

[28th March, 2016]

Whereas the Bio-Medical Waste (Management and Handling) Rules, 1998 was published vide notification number S.O. 630(E) dated the 20th July, 1998, by the Government of India in the erstwhile Ministry of Environment and Forests, provided a regulatory frame work for management of bio-medical waste generated in the country;

And whereas, to implement these rules more effectively and to improve the collection, segregation, processing, treatment and disposal of these bio-medical wastes in an environmentally sound management thereby, reducing the bio-medical waste generation and its impact on the environment, the Central Government reviewed the existing rules;

And whereas, in exercise of the powers conferred by Sections 6, 8 and 25 of the Environment (Protection) Act, 1986 (29 of 1986), the Central Government published the draft rules in the Gazette vide number G.S.R. 450(E), dated the 3rd June, 2015 inviting objections or suggestions from the public within sixty days from the date on which copies of the Gazette containing the said notification were made available to the public;

And whereas, the copies of the Gazette containing the said draft rules were made available to the public on the 3rd June, 2015;

And whereas, the objections or comments received within the specified period from the public in respect of the said draft rules have been duly considered by the Central Government;

Now, therefore, in exercise of the powers conferred by Section 6, 8 and 25 of the Environment (Protection) Act, 1986 (29 of 1986), and in supersession of the Bio-Medical Waste (Management and Handling) Rules, 1998, except as respects things done or omitted to be done before such suppression, the Central Government hereby makes the following rules, namely—

1. Short title and commencement.—(1) these rules may be called the **Bio-Medical Waste Management Rules, 2016.**

(2) They shall come into force on the date of their publication in the Official Gazette.

2. Application.—(1) These rules shall apply to all persons who generate, collect, receive, store, transport, treat, dispose, or handle bio medical waste in any form including hospitals, nursing homes, clinics, dispensaries, veterinary institutions, animal houses, pathological laboratories, blood banks, ayush hospitals, clinical establishments, research or educational institutions, health camps, medical or surgical camps, vaccination camps, blood donation camps, first aid rooms of schools, forensic laboratories and research labs.

(2) These rules shall not apply to,—

- (a) radioactive wastes as covered under the provisions of the Atomic Energy Act, 1962(33 of 1962) and the rules made there under;
- (b) hazardous chemicals covered under the Manufacture, Storage and Import of Hazardous Chemicals Rules, 1989 made under the Act;
- (c) solid wastes covered under the ²[Solid Waste Management Rules, 2016] made under the Act;
- (d) the lead acid batteries covered under the Batteries (Management and Handling) Rules, 2001 made under the Act;
- (e) hazardous wastes covered under the ³[Hazardous and Other Wastes (Management and Transboundary Movement) Rules, 2016] made under the Act;
- (f) waste covered under the ⁴[E-Waste (Management) Rules, 2016] made under the Act; and
- (g) hazardous micro organisms, genetically engineered micro organisms and cells covered under the Manufacture, Use, Import, Export and Storage of Hazardous Microorganisms, Genetically Engineered Micro organisms or Cells Rules, 1989 made under the Act.

3. Definitions.—In these rules, unless the context otherwise requires,—

- (a) "Act" means the Environment (Protection) Act, 1986 (29 of 1986);
- (b) "animal house" means a place where animals are reared or kept for the purpose of experiments or testing;
- (c) "authorisation" means permission granted by the prescribed authority for the generation, collection, reception, storage, transportation, treatment, processing, disposal or any other form of handling of bio-medical waste in accordance with these rules and guidelines issued by the Central Government or Central Pollution Control Board as the case may be;
- (d) "authorised person" means an occupier or operator authorised by the prescribed authority to generate, collect, receive, store, transport, treat, process, dispose or handle bio-medical waste in

accordance with these rules and the guidelines issued by the Central Government or the Central Pollution Control Board, as the case may be;

- (e) "biological" means any preparation made from organisms or micro-organisms or product of metabolism and biochemical reactions intended for use in the diagnosis, immunisation or the treatment of human beings or animals or in research activities pertaining thereto;
 - (f) "bio-medical waste" 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 biological or in health camps, including the categories mentioned in Schedule I appended to these rules;
 - (g) "bio-medical waste treatment and disposal facility" means any facility wherein treatment, disposal of bio-medical waste or processes incidental to such treatment and disposal is carried out, and includes common bio-medical waste treatment facilities;
 - (h) "Form" means the Form appended to these rules;
 - (i) "handling" in relation to bio-medical waste includes the generation, sorting, segregation, collection, use, storage, packaging, loading, transportation, unloading, processing, treatment, destruction, conversion, or offering for sale, transfer, disposal of such waste;
 - (j) "health care facility" means a place where diagnosis, treatment or immunisation of human beings or animals is provided irrespective of type and size of health treatment system, and research activity pertaining thereto;
 - (k) "major accident" means accident occurring while handling of bio-medical waste having potential to affect large masses of public and includes toppling of the truck carrying bio-medical waste, accidental release of bio-medical waste in any water body but exclude accidents like needle prick injuries, mercury spills;
 - (l) "management" includes all steps required to ensure that bio- medical waste is managed in such a manner as to protect health and environment against any adverse effects due to handling of such waste;
 - (m) "occupier" means a person having administrative control over the institution and the premises generating bio-medical waste, which includes a hospital, nursing home, clinic, dispensary, veterinary institution, animal house, pathological laboratory, blood bank, health care facility and clinical establishment, irrespective of their system of medicine and by whatever name they are called;
 - (n) "operator of a common bio-medical waste treatment facility" means a person who owns or controls a Common Bio-medical Waste Treatment Facility (CBMWTF) for the collection, reception, storage, transport, treatment, disposal or any other form of handling of bio-medical waste;
 - (o) "prescribed authority" means the State Pollution Control Board in respect of a State and Pollution Control Committees in respect of an Union territory;
 - (p) "Schedule" means the Schedule appended to these rules.
- 4. Duties of the Occupier.**—It shall be the duty of every occupier to—
- (a) take all necessary steps to ensure that bio-medical waste is handled without any adverse effect to human health and the environment and in accordance with these rules;
 - (b) make a provision within the premises for a safe, ventilated and secured location for storage of segregated biomedical waste in colored bags or containers in the manner as specified in Schedule I, to ensure that there shall be no secondary handling, pilferage of recyclables or inadvertent scattering or spillage by animals and the bio-medical waste from such place or premises shall be directly transported in the manner as prescribed in these rules to the common bio-medical waste treatment facility or for the appropriate treatment and disposal, as the case may be, in the manner as prescribed in Schedule I;
 - (c) pre-treat the laboratory waste, microbiological waste, blood samples and blood bags through disinfection or sterilisation on-site in the manner as prescribed by the World Health Organisation (WHO) ¹[, guidelines on Safe management of wastes from health care activities and WHO Blue Book, 2014 and then sent to the Common bio-medical waste treatment facility for final disposal;]
- ¹[(d) phase out use of chlorinated plastic bags (excluding blood bags) and gloves by the 27th March, 2019;]
- ²[Explanation.—For removal of doubts, it is hereby clarified that the expression "Chlorinated plastic bags" shall not include urine bags, effluent bags, abdominal bags and chest drainage bags.]
- (e) dispose of solid waste other than bio-medical waste in accordance with the provisions of respective waste management rules made under the relevant laws and amended from time to time;
 - (f) not to give treated bio-medical waste with municipal solid waste;
 - (g) provide training to all its health care workers and others, involved in handling of bio medical waste at the time of induction and thereafter at least once every year and the details of training programmes conducted, number of personnel trained and number of personnel not undergone any training shall be provided in the Annual Report;
 - (h) immunise all its health care workers and others, involved in handling of bio-medical waste for

protection against diseases including Hepatitis B and Tetanus that are likely to be transmitted by handling of bio-medical waste, in the manner as prescribed in the National Immunisation Policy or the guidelines of the Ministry of Health and Family Welfare issued from time to time;

- (i) establish a Bar- Code System for bags or containers containing bio-medical waste to be sent out of the premises or ²[for the further treatment and disposal in accordance with the guidelines issued by the Central Pollution Control Board by 27th March, 2019;]
- (j) ensure segregation of liquid chemical waste at source and ensure pre-treatment or neutralisation prior to mixing with other effluent generated from health care facilities;
- (k) ensure treatment and disposal of liquid waste in accordance with the Water (Prevention and Control of Pollution) Act, 1974 (6 of 1974);
- (l) ensure occupational safety of all its health care workers and others involved in handling of bio-medical waste by providing appropriate and adequate personal protective equipments;
- (m) conduct health check up at the time of induction and at least once in a year for all its health care workers and others involved in handling of bio- medical waste and maintain the records for the same;
- ²[(n) in case of all bedded health care units, maintain and update on day to day basis the bio-medical waste management register and display the monthly record on its website according to the bio-medical waste generated in terms of category and colour coding as specified in Schedule I;]
- (o) report major accidents including accidents caused by fire hazards, blasts during handling of bio-medical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority and also along with the annual report;
- ^{1A}[(p) in case of all bedded health care facilities (any number of beds), make available the annual report on its web-site within a period of two years from the date of publication of the Bio-Medical Waste Management (Amendment) Rules, 2018;]
- (q) inform the prescribed authority immediately in case the operator of a facility does not collect the bio-medical waste within the intended time or as per the agreed time;
- (r) establish a system to review and monitor the activities related to bio-medical waste management, either through an existing committee or by forming a new committee and the Committee shall meet once in every six months and the record of the minutes of the meetings of this committee shall be submitted along with the annual report to the prescribed authority and the healthcare establishments having less than thirty beds shall designate a qualified person to review and monitor the activities relating to bio-medical waste management within that establishment and submit the annual report;
- (s) maintain all record for operation of incineration, hydro or autoclaving etc., for a period of five years;
- (t) existing incinerators to achieve the standards for treatment and disposal of bio-medical waste as specified in Schedule II for retention time in secondary chamber and Dioxin and Furans within two years from the date of this notification.

5. Duties of the operator of a common bio-medical waste treatment and disposal facility.—It shall be the duty of every operator to—

- (a) take all necessary steps to ensure that the bio-medical waste collected from the occupier is transported, handled, stored, treated and disposed of, without any adverse effect to the human health and the environment, in accordance with these rules and guidelines issued by the Central Government or, as the case may be, the central pollution control board from time to time;
- (b) ensure timely collection of bio-medical waste from the occupier as prescribed under these rules;
- (c) establish bar coding and global positioning system for handling of bio- medical waste ^{1A}[in accordance with the guidelines issued by the Central Pollution Control Board by 27th March, 2019];
- (d) inform the prescribed authority immediately regarding the occupiers which are not handing over the segregated bio-medical waste in accordance with these rules;
- (e) provide training for all its workers involved in handling of bio-medical waste at the time of induction and at least once a year thereafter;
- (f) assist the occupier in training conducted by them for bio-medical waste management;
- (g) undertake appropriate medical examination at the time of induction and at least once in a year and immunise all its workers involved in handling of bio-medical waste for protection against diseases, including Hepatitis B and Tetanus, that are likely to be transmitted while handling bio-medical waste and maintain the records for the same;
- (h) ensure occupational safety of all its workers involved in handling of bio-medical waste by providing appropriate and adequate personal protective equipment;
- (i) report major accidents including accidents caused by fire hazards, blasts during handling of bio-medical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority and also along with the annual report;
- (j) maintain a log book for each of its treatment equipment according to weight of batch; categories of waste treated; time, date and duration of treatment cycle and total hours of operation;
- (k) allow occupier, who are giving waste for treatment to the operator, to see whether the treatment is carried out as per the rules;

- (l) shall display details of authorisation, treatment, annual report etc on its web-site;
- (m) after ensuring treatment by autoclaving or microwaving followed by mutilation or shredding, whichever is applicable, the recyclables from the treated bio-medical wastes such as plastics and glass, shall be given to recyclers having valid consent or authorisation or registration from the respective State Pollution Control Board or Pollution Control Committee;
- (n) supply non-chlorinated plastic coloured bags to the occupier on chargeable basis, if required;
- (o) common bio-medical waste treatment facility shall ensure collection of biomedical waste on holidays also;
- (p) maintain all record for operation of incineration, hydrou autoclaving for a period of five years; and
- (q) upgrade existing incinerators to achieve the standards for retention time in secondary chamber and Dioxin and Furans within two years from the date of this notification.

6. Duties of authorities.—The Authority specified in column (2) of Schedule-III shall perform the duties as specified in column (3) thereof in accordance with the provisions of these rules.

7. Treatment and disposal.—(1) Bio-medical waste shall be treated and disposed of in accordance with Schedule I, and in compliance with the standards provided in Schedule-II by the health care facilities and common bio-medical waste treatment facility.

(2) Occupier shall hand over segregated waste as per the Schedule-I to common bio-medical waste treatment facility for treatment, processing and final disposal:

Provided that the lab and highly infectious bio-medical waste generated shall be pre-treated by equipment like autoclave or microwave.

(3) No occupier shall establish on-site treatment and disposal facility, if a service of common bio-medical waste treatment facility is available at a distance of seventy-five kilometer.

(4) In cases where service of the common bio-medical waste treatment facility is not available, the Occupiers shall set up requisite biomedical waste treatment equipment like incinerator, autoclave or microwave, shredder prior to commencement of its operation, as per the authorisation given by the prescribed authority.

(5) Any person including an occupier or operator of a common bio medical waste treatment facility, intending to use new technologies for treatment of bio medical waste other than those listed in Schedule I shall request the Central Government for laying down the standards or operating parameters.

(6) On receipt of a request referred to in sub-rule (5), the Central Government may determine the standards and operating parameters for new technology which may be published in Gazette by the Central Government.

(7) Every operator of common bio-medical waste treatment facility shall set up requisite biomedical waste treatment equipments like incinerator, autoclave or microwave, shredder and effluent treatment plant as a part of treatment, prior to commencement of its operation.

(8) Every occupier shall ¹²[phase out use of chlorinated plastic bags] within two years from the date of publication of these rules and after two years from such publication of these rules, the chlorinated plastic bags shall not be used for storing and transporting of bio-medical waste and the occupier or operator of a common bio-medical waste treatment facility shall not dispose of such plastics by incineration and the bags used for storing and transporting biomedical waste shall be in compliance with the Bureau of Indian Standards. Till the Standards are published, the carry bags shall be as per ¹³[the Plastic Waste Management Rules, 2016].

(9) After ensuring treatment by autoclaving or microwaving followed by mutilation or shredding, whichever is applicable, the recyclables from the treated bio-medical wastes such as plastics and glass shall be given to such recyclers having valid authorisation or registration from the respective prescribed authority.

(10) The Occupier or Operator of a common bio-medical waste treatment facility shall maintain a record of recyclable wastes referred to in sub-rule (9) which are auctioned or sold and the same shall be submitted to the prescribed authority as part of its annual report. The record shall be open for inspection by the prescribed authorities.

(11) The handling and disposal of all the mercury waste and lead waste shall be in accordance with the respective rules and regulations.

8. Segregation, packaging, transportation and storage.—(1) No untreated bio-medical waste shall be mixed with other wastes.

(2) The bio-medical waste shall be segregated into containers or bags at the point of generation in accordance with Schedule I prior to its storage, transportation, treatment and disposal.

(3) The containers or bags referred to in sub-rule (2) shall be labeled as specified in Schedule IV.

(4) Bar code and global positioning system shall be added by the Occupier and common bio-medical waste treatment facility in one year time.

(5) The operator of common bio-medical waste treatment facility shall transport the bio-medical waste from the premises of an occupier to any off-site bio-medical waste treatment facility only in the vehicles having label as provided in part 'A' of the Schedule IV along with necessary information as specified in part 'B' of the Schedule IV.

(6) The vehicles used for transportation of bio-medical waste shall comply with the conditions if any stipulated by the State Pollution Control Board or Pollution Control Committee in addition to the requirement

contained in the Motor Vehicles Act, 1988 (59 of 1988), if any or the rules made there under for transportation of such infectious waste.

(7) Untreated human anatomical waste, animal anatomical waste, soiled waste and, biotechnology waste shall not be stored beyond a period of forty-eight hours:

Provided that in case for any reason it becomes necessary to store such waste beyond such a period, the occupier shall take appropriate measures to ensure that the waste does not adversely affect human health and the environment and inform the prescribed authority along with the reasons for doing so.

(8) Microbiology waste and all other clinical laboratory waste shall be pre-treated by sterilisation to Log 6 or disinfection to Log 4, as per the World Health Organisation guidelines before packing and sending to the common bio-medical waste treatment facility.

9. Prescribed authority.—(1) The prescribed authority for implementation of the provisions of these rules shall be the State Pollution Control Boards in respect of States and Pollution Control Committees in respect of Union territories.

(2) The prescribed authority for enforcement of the provisions of these rules in respect of all health care establishments including hospitals, nursing homes, clinics, dispensaries, veterinary institutions, animal houses, pathological laboratories and blood banks of the Armed Forces under the Ministry of Defence shall be the Director General, Armed Forces Medical Services, who shall function under the supervision and control of the Ministry of Defence.

(3) The prescribed authorities shall comply with the responsibilities as stipulated in Schedule III of these rules.

10. Procedure for authorisation.—Every occupier or operator handling bio-medical waste, irrespective of the quantity shall make an application in Form II to the prescribed authority i.e. State Pollution Control Board and Pollution Control Committee, as the case may be, for grant of authorisation and the prescribed authority shall grant the provisional authorisation in Form III and the validity of such authorisation for bedded health care facility and operator of a common facility shall be synchronised with the validity of the consents.

(1) The authorisation shall be one time for non-bedded occupiers and the authorisation in such cases shall be deemed to have been granted, if not objected by the prescribed authority within a period of ninety days from the date of receipt of duly completed application along with such necessary documents.

(2) In case of refusal of renewal, cancellation or suspension of the authorisation by the prescribed authority, the reasons shall be recorded in writing:

Provided that the prescribed authority shall give an opportunity of being heard to the applicant before such refusal of the authorisation.

(3) Every application for authorisation shall be disposed of by the prescribed authority within a period of ninety days from the date of receipt of duly completed application along with such necessary documents, failing which it shall be deemed that the authorisation is granted under these rules.

(4) In case of any change in the bio-medical waste generation, handling, treatment and disposal for which authorisation was earlier granted, the occupier or operator shall intimate to the prescribed authority about the change or variation in the activity and shall submit a fresh application in Form II for modification of the conditions of authorisation.

11. Advisory Committee.—(1) Every State Government or Union territory Administration shall constitute an Advisory Committee for the respective State or Union territory under the chairmanship of the respective health secretary to oversee the implementation of the rules in the respective state and to advise any improvements and the Advisory Committee shall include representatives from the Departments of Health, Environment, Urban Development, Animal Husbandry and Veterinary Sciences of that State Government or Union territory Administration, State Pollution Control Board or Pollution Control Committee, urban local bodies or local bodies or Municipal Corporation, representatives from Indian Medical Association, common bio-medical waste treatment facility and non-governmental organisation.

(2) Notwithstanding anything contained in sub-rule (1), the Ministry of Defence shall constitute the Advisory Committee (Defence) under the chairmanship of Director General of Health Services of Armed Forces consisting of representatives from the Ministry of Defence, Ministry of Environment, Forest and Climate Change, Central Pollution Control Board, Ministry of Health and Family Welfare, Armed Forces Medical College or Command Hospital.

(3) The Advisory Committee constituted under sub-rule (1) and (2) shall meet at least once in six months and review all matters related to implementation of the provisions of these rules in the State and Armed Forces Health Care Facilities, as the case may be.

(4) The Ministry of Health and Defence may co-opt representatives from the other Governmental and non-governmental organisations having expertise in the field of bio-medical waste management.

12. Monitoring of implementation of the rules in health care facilities.—(1) The Ministry of Environment, Forest and Climate Change shall review the implementation of the rules in the country once in a year through the State Health Secretaries and Chairmen or Member Secretary of State Pollution Control Boards and Central Pollution Control Board and the Ministry may also invite experts in the field of bio-medical waste management, if required.

(2) The Central Pollution Control Board shall monitor the implementation of these rules in respect of all the

Armed Forces health care establishments under the Ministry of Defence.

(3) The Central Pollution Control Board along with one or more representatives of the Advisory Committee constituted under sub-rule (2) of Rule 11, may inspect any Armed Forces health care establishments after prior intimation to the Director General Armed Forces Medical Services.

(4) Every State Government or Union territory Administration shall constitute District Level Monitoring Committee in the districts under the chairmanship of District Collector or District Magistrate or Deputy Commissioner or Additional District Magistrate to monitor the compliance of the provisions of these rules in the health care facilities generating bio-medical waste and in the common bio-medical waste treatment and disposal facilities, where the bio-medical waste is treated and disposed of.

(5) The District Level Monitoring Committee constituted under sub-rule (4) shall submit its report once in six months to the State Advisory Committee and a copy thereof shall also be forwarded to State Pollution Control Board or Pollution Control Committee concerned for taking further necessary action.

(6) The District Level Monitoring Committee shall comprise of District Medical Officer or District Health Officer, representatives from State Pollution Control Board or Pollution Control Committee, Public Health Engineering Department, local bodies or municipal corporation, Indian Medical Association, common bio-medical waste treatment facility and registered non-governmental organisations working in the field of bio-medical waste management and the Committee may co-opt other members and experts, if necessary and the District Medical Officer shall be the Member Secretary of this Committee.

13. Annual report.—(1) Every occupier or operator of common bio-medical waste treatment facility shall submit an annual report to the prescribed authority in Form-IV, on or before the 30th June of every year.

(2) The prescribed authority shall compile, review and analyse the information received and send this information to the ⁴⁴[Central Pollution Control Board in Form IV-A before] the 31st July of every year.

(3) The Central Pollution Control Board shall compile, review and analyse the information received and send this information, along with its comments or suggestions or observations to the Ministry of Environment, Forest and Climate Change on or before 31st August every year.

(4) The Annual Reports shall also be available online on the websites of Occupiers, State Pollution Control Boards and Central Pollution Control Board.

14. Maintenance of records.—(1) Every authorised person shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal or any other form of handling of bio-medical waste, for a period of five years, in accordance with these rules and guidelines issued by the Central Government or the Central Pollution Control Board or the prescribed authority as the case may be.

(2) All records shall be subject to inspection and verification by the prescribed authority or the Ministry of Environment, Forest and Climate Change at any time.

15. Accident reporting.—(1) In case of any major accident at any institution or facility or any other site while handling bio-medical waste, the authorised person shall intimate immediately to the prescribed authority about such accident and forward a report within twenty-four hours in writing regarding the remedial steps taken in Form I.

(2) Information regarding all other accidents and remedial steps taken shall be provided in the annual report in accordance with Rule 13 by the occupier.

16. Appeal.—(1) Any person aggrieved by an order made by the prescribed authority under these rules may, within a period of thirty days from the date on which the order is communicated to him, prefer an appeal in Form V to the Secretary (Environment) of the State Government or Union territory administration .

(2) Any person aggrieved by an order of the Director General Armed Forces Medical Services under these rules may, within thirty days from the date on which the order is communicated to him, prefer an appeal in Form V to the Secretary, Ministry of Environment, Forest and Climate Change.

(3) The authority referred to in sub-para (1) and (2) as the case may be, may entertain the appeal after the expiry of the said period of thirty days, if it is satisfied that the appellant was prevented by sufficient cause from filing the appeal in time.

(4) The appeal shall be disposed of within a period of ninety days from the date of its filing.

17. Site for common bio-medical waste treatment and disposal facility.—(1) Without prejudice to Rule 5 of these rules, the department in the business allocation of land assignment shall be responsible for providing suitable site for setting up of common biomedical waste treatment and disposal facility in the State Government or Union territory Administration.

(2) The selection of site for setting up of such facility shall be made in consultation with the prescribed authority, other stakeholders and in accordance with guidelines published by the Ministry of Environment, Forest and Climate Change or Central Pollution Control Board.

18. Liability of the occupier, operator of a facility.—(1) The occupier or an operator of a common bio-medical waste treatment facility shall be liable for all the damages caused to the environment or the public due to improper handling of bio- medical wastes.

(2) The occupier or operator of common bio-medical waste treatment facility shall be liable for action under Section 5 and Section 15 of the Act, in case of any violation.

SCHEDULE I

[See rules 3 (e), 4(b), 7(1), 7(2), 7(5), 7 (6) and 8(2)]

Part 1

Biomedical wastes categories and their segregation, collection, treatment, processing and disposal options

Category	Type of Waste	Type of Bag or Container to be used	Treatment and Disposal options
(1)	(2)	(3)	(4)
Yellow	(a) Human Anatomical Waste: Human tissues, organs, body parts and fetus below the viability period (as per the Medical Termination of Pregnancy Act 1971, amended from time to time).	Yellow coloured non-chlorinated plastic bags	Incineration or Plasma Pyrolysis or deep burial*
	(b) Animal Anatomical Waste: Experimental animal carcasses, body parts, organs, tissues, including the waste generated from animals used in experiments or testing in veterinary hospitals or colleges or animal houses.		
	(c) Soiled Waste: Items contaminated with blood, body fluids like dressings, plaster casts, cotton swabs and bags containing residual or discarded blood and blood components.		Incineration or Plasma Pyrolysis or deep burial* In absence of above facilities, autoclaving or micro-waving/ hydroclaving followed by shredding or mutilation or combination of sterilization and shredding. Treated waste to be sent for energy recovery.
	(d) Expired or Discarded Medicines: Pharmaceutical waste like antibiotics, cytotoxic drugs including all items contaminated with cytotoxic drugs along with glass or plastic ampoules, vials etc.	Yellow coloured non-chlorinated plastic bags or containers	Expired cytotoxic drugs and items contaminated with cytotoxic drugs to be returned back to the manufacturer or supplier for incineration at temperature >1200°C or to common bio-medical waste treatment facility or hazardous waste treatment, storage and disposal facility for incineration at >1200°C Or Encapsulation or Plasma Pyrolysis at >1200°C. All other discarded medicines shall be either sent back to manufacturer or disposed by incineration.
	(e) Chemical Waste: Chemicals used in production of biological and used or discarded disinfectants.	Yellow coloured containers or non-chlorinated plastic bags	Disposed of by incineration or Plasma Pyrolysis or Encapsulation in hazardous waste treatment, storage and disposal facility.
	(f) Chemical Liquid Waste: Liquid waste generated due to use of chemicals in production of biological and used or discarded disinfectants, Silver X-ray film developing liquid, discarded Formalin, infected secretions, aspirated body fluids,	Separate collection system leading to effluent treatment system	After resource recovery, the chemical liquid waste shall be pre-treated before mixing with other wastewater. The combined discharge shall conform to the discharge norms given in Schedule- III.

	liquid from laboratories and floor washings, cleaning, housekeeping and disinfecting activities etc.		
	(g) Discarded linen, mattresses, beddings contaminated with blood or body fluid ¹⁵ [, routine mask and gown].	Non-chlorinated yellow plastic bags or suitable packing material	Non- chlorinated chemical disinfection followed by incineration or Plazma Pyrolysis or for energy recovery. In absence of above facilities, shredding or mutilation or combination of sterilization and shredding. Treated waste to be sent for energy recovery or incineration or Plazma Pyrolysis.
	(h) Microbiology, Biotechnology and other clinical laboratory waste: Blood bags, Laboratory cultures, stocks or specimens of microorganisms, live or attenuated vaccines, human and animal cell cultures used in research, industrial laboratories, production of biological, residual toxins, dishes and devices used for cultures.	¹⁶ [Autoclave or Microwave or Hydroclave safe plastic bags or containers]	Pre-treat to sterilize with non-chlorinated chemicals on-site ¹⁷ [as per World Health Organisation guidelines on Safe management of wastes from health care activities and WHO Blue Book, 2014 and thereafter sent for incineration].
Red	Contaminated Waste (Recyclable) (a) Wastes generated from disposable items such as tubing, bottles, intravenous tubes and sets, catheters, urine bags, syringes (without needles and fixed needle syringes) and vaccutainers with their needles cut) and gloves.	Red coloured non-chlorinated plastic bags or containers	Autoclaving or micro-waving/ hydroclaving followed by shredding or mutilation or combination of sterilization and shredding. Treated waste to be sent to registered or authorized recyclers or for energy recovery or plastics to diesel or fuel oil or for road making, whichever is possible. Plastic waste should not be sent to landfill sites.
White (Translucent)	Waste sharps including Metals: Needles, syringes with fixed needles, needles from needle tip cutter or burner, scalpels, blades, or any other contaminated sharp object that may cause puncture and cuts. This includes both used, discarded and contaminated metal sharps	Puncture proof, Leak proof, tamper proof containers	Autoclaving or Dry Heat Sterilization followed by shredding or mutilation or encapsulation in metal container or cement concrete; combination of shredding cum autoclaving; and sent for final disposal to iron foundries (having consent to operate from the State Pollution Control Boards or Pollution Control Committees) or sanitary landfill or designated concrete waste sharp pit.
Blue	(a) Glassware: Broken or discarded and contaminated glass including medicine vials and ampoules except those contaminated with cytotoxic wastes.	¹⁸ [(a) Puncture proof and leak proof boxes or containers with blue colored marking]	Disinfection (by soaking the washed glass waste after cleaning with detergent and Sodium Hypochlorite treatment) or through autoclaving or microwaving or hydroclaving and then sent for recycling.
	(b) Metallic Body Implants	¹⁹ [(b) Puncture proof and leak proof boxes or containers with	

	blue marking	colored
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* Disposal by deep burial is permitted only in rural or remote areas where there is no access to common bio-medical waste treatment facility. This will be carried out with prior approval from the prescribed authority and as per the Standards specified in Schedule II. The deep burial facility shall be located as per the provisions and guidelines issued by Central Pollution Control Board from time to time.

Part 2

- (1) All plastic bags shall be as per BIS standards as and when published, till then the prevailing Plastic Waste Management Rules shall be applicable.
- (2) Chemical treatment using at least 24[1% to 2%] Sodium Hypochlorite having 30% residual chlorine for twenty minutes or any other equivalent chemical reagent that should demonstrate $\text{Log}_{10}4$ reduction efficiency for microorganisms as given in Schedule III.
- (3) Mutilation or shredding must be to an extent to prevent unauthorized reuse.
- (4) There will be no chemical pretreatment before incineration, except for microbiological, lab and highly infectious waste.
- (5) Incineration ash (ash from incineration of any bio-medical waste) shall be disposed through hazardous waste treatment, storage and disposal facility, if toxic or hazardous constituents are present beyond the prescribed limits as given in the Hazardous Waste (Management, Handling and Transboundary Movement) Rules, 2008 or as revised from time to time.
- (6) Dead Fetus below the viability period (as per the Medical Termination of Pregnancy Act 1971, amended from time to time) can be considered as human anatomical waste. Such waste should be handed over to the operator of common bio-medical waste treatment and disposal facility in yellow bag with a copy of the official Medical Termination of Pregnancy certificate from the Obstetrician or the Medical Superintendent of hospital or healthcare establishment.
- (7) Cytotoxic drug vials shall not be handed over to unauthorised person under any circumstances. These shall be sent back to the manufactures for necessary disposal at a single point. As a second option, these may be sent for incineration at common bio-medical waste treatment and disposal facility or TSDFs or plasma pyrolysis at temperature $>1200^{\circ}\text{C}$.
- (8) Residual or discarded chemical wastes, used or discarded disinfectants and chemical sludge can be disposed at hazardous waste treatment, storage and disposal facility. In such case, the waste should be sent to hazardous waste treatment, storage and disposal facility through operator of common bio-medical waste treatment and disposal facility only.
- (9) On-site pre-treatment of laboratory waste, microbiological waste, blood samples, blood bags should be disinfected or sterilized as per the Guidelines of World Health Organisation or National AIDS Control Organisation and then given to the common bio-medical waste treatment and disposal facility.
- (10) Installation of in-house incinerator is not allowed. However in case there is no common biomedical facility nearby, the same may be installed by the occupier after taking authorisation from the State Pollution Control Board.
- (11) Syringes should be either mutilated or needles should be cut and or stored in tamper proof, leak proof and puncture proof containers for sharps storage. Wherever the occupier is not linked to a disposal facility it shall be the responsibility of the occupier to sterilize and dispose in the manner prescribed.
- (12) Bio-medical waste generated in households during healthcare activities shall be segregated as per these rules and handed over in separate bags or containers to municipal waste collectors. Urban Local Bodies shall have tie up with the common bio-medical waste treatment and disposal facility to pickup this waste from the Material Recovery Facility (MRF) or from the house hold directly, for final disposal in the manner as prescribed in this Schedule.

SCHEDULE II

[See Rule 4(t), 7(1) and 7(6)]

STANDARDS FOR TREATMENT AND DISPOSAL OF BIO-MEDICAL WASTES**1. STANDARDS FOR INCINERATION. —**

All incinerators shall meet the following operating and emission standards-

A. Operating Standards

- (1) Combustion efficiency (CE) shall be at least 99.00%.
- (2) The Combustion efficiency is computed as follows:

$$\%CO_2$$

$$C.E. = \frac{\%CO_2}{\%CO_2 + \%CO} \times 100$$

$$\%CO_2 + \%CO$$

(3) The temperature of the primary chamber shall be a minimum of 800°C and the secondary chamber shall be minimum of 1050°C = or – 50°C.

(4) The secondary chamber gas residence time shall be at least two seconds.

B. Emission Standards

Sl. No.	Parameter	Standards	
(1)	(2)	(3)	(4)
		Limiting concentration in $\mu\text{g}/\text{Nm}^3$ unless stated	Sampling Duration in minutes, unless stated
1.	Particulate matter	50	30 or 1 Nm^3 of sample volume, whichever is more
2.	Nitrogen Oxides NO and NO ₂ expressed as NO ₂	400	30 for online sampling or grab sample
3.	HCl	50	30 or 1 Nm^3 of sample volume, whichever is more
4.	Total Dioxins and Furans	0.1ngTEQ/ Nm^3 (at 11% O ₂)	8 hours or 5 Nm^3 of sample volume, whichever is more
5.	Hg and its compounds	0.05	2 hours or 5 Nm^3 of sample volume, whichever is more

C. Stack Height: Minimum stack height shall be 30 meters above the ground and shall be attached with the necessary monitoring facilities as per requirement of monitoring of 'general parameters' as notified under the Environment (Protection) Act, 1986 and in accordance with the Central Pollution Control Board Guidelines of Emission Regulation Part-III.

Note:

- The existing incinerators shall comply with the above within a period of two years from the date of the notification.
- The existing incinerators shall comply with the standards for Dioxins and Furans of 0.1ngTEQ/ Nm^3 , as given below within two years from the date of commencement of these rules.
- All upcoming common bio-medical waste treatment facilities having incineration facility or captive incinerator shall comply with standards for Dioxins and Furans.
- The existing secondary combustion chambers of the incinerator and the pollution control devices shall be suitably retrofitted, if necessary, to achieve the emission limits.
- Wastes to be incinerated shall not be chemically treated with any chlorinated disinfectants.
- Ash from incineration of biomedical waste shall be disposed of at common hazardous waste treatment and disposal facility. However, it may be disposed of in municipal landfill, if the toxic metals in incineration ash are within the regulatory quantities as defined under the Hazardous Waste (Management and Handling and Transboundary Movement) Rules, 2008 as amended from time to time.
- Only low Sulphur fuel like Light Diesel Oil or Low Sulphur Heavy Stock or Diesel, Compressed Natural Gas, Liquefied Natural Gas or Liquefied Petroleum Gas shall be used as fuel in the incinerator.
- The occupier or operator of a common bio-medical waste treatment facility shall monitor the stack gaseous emissions (under optimum capacity of the incinerator) once in three months through a laboratory approved under the Environment (Protection) Act, 1986 and record of such analysis results shall be maintained and submitted to the prescribed authority. In case of dioxins and furans, monitoring should be done once in a year.
- The occupier or operator of the common bio-medical waste treatment facility shall install continuous emission monitoring system for the parameters as stipulated by State Pollution Control Board or Pollution Control Committees in authorisation and transmit the data real time to the servers at State Pollution Control Board or Pollution Control Committees and Central Pollution Control Board.
- All monitored values shall be corrected to 11% Oxygen on dry basis.
- Incinerators (combustion chambers) shall be operated with such temperature, retention time and turbulence, as to achieve Total Organic Carbon content in the slag and bottom ashes less than 3% or their loss on ignition shall be less than 5% of the dry weight.
- The occupier or operator of a common bio-medical waste incinerator shall use combustion gas analyzer to

measure CO₂, CO and O₂.

2. Operating and Emission Standards for Disposal by Plasma Pyrolysis or Gasification:

A. Operating Standards:

All the operators of the Plasma Pyrolysis or Gasification shall meet the following operating and emission standards:

(1) Combustion Efficiency (CE) shall be at least 99.99%.

(2) The Combustion Efficiency is computed as follows.

% CO₂

C.E =

X 100

(% CO₂ + % CO)

(3) The temperature of the combustion chamber after plasma gasification shall be 1050 ± 50°C with gas residence time of at least 2(two) second, with minimum 3 % Oxygen in the stack gas.

(4) The Stack height should be minimum of 30 m above ground level and shall be attached with the necessary monitoring facilities as per requirement of monitoring of 'general parameters' as notified under the Environment (Protection) Act, 1986 and in accordance with the CPCB Guidelines of Emission Regulation Part-III.

B. Air Emission Standards and Air Pollution Control Measures

(i) Emission standards for incinerator, notified at SI No.1 above in this Schedule, and revised from time to time, shall be applicable for the Plasma Pyrolysis or Gasification also.

(ii) Suitably designed air pollution control devices shall be installed or retrofitted with the 'Plasma Pyrolysis or Gasification to achieve the above emission limits, if necessary.

(iii) Wastes to be treated using Plasma Pyrolysis or Gasification shall not be chemically treated with any chlorinated disinfectants and chlorinated plastics shall not be treated in the system.

C. Disposal of Ash Vitrified Material: The ash or vitrified material generated from the 'Plasma Pyrolysis or Gasification shall be disposed off in accordance with the Hazardous Waste (Management, Handling and Transboundary Movement) Rules 2008 and revisions made thereafter in case the constituents exceed the limits prescribed under Schedule II of the said Rules or else in accordance with the provisions of the Environment (Protection) Act, 1986, whichever is applicable.

3. STANDARDS FOR AUTOCLAVING OF BIO-MEDICAL WASTE.—

The autoclave should be dedicated for the purposes of disinfecting and treating bio-medical waste.

(1) When operating a gravity flow autoclave, medical waste shall be subjected to:

(i) a temperature of not less than 121° C and pressure of 15 pounds per square inch (psi) for an autoclave residence time of not less than 60 minutes; or

(ii) a temperature of not less than 135° C and a pressure of 31 psi for an autoclave residence time of not less than 45 minutes; or

(iii) a temperature of not less than 149° C and a pressure of 52 psi for an autoclave residence time of not less than 30 minutes.

(2) When operating a vacuum autoclave, medical waste shall be subjected to a minimum of three pre-vacuum pulse to purge the autoclave of all air. The air removed during the pre-vacuum, cycle should be decontaminated by means of HEPA and activated carbon filtration, steam treatment, or any other method to prevent release of pathogen. The waste shall be subjected to the following:

(i) a temperature of not less than 121°C and pressure of 15 psi per an autoclave residence time of not less than 45 minutes; or

(ii) a temperature of not less than 135°C and a pressure of 31 psi for an autoclave residence time of not less than 30 minutes;

(3) Medical waste shall not be considered as properly treated unless the time, temperature and pressure indicators indicate that the required time, temperature and pressure were reached during the autoclave process. If for any reasons, time temperature or pressure indicator indicates that the required temperature, pressure or residence time was not reached, the entire load of medical waste must be autoclaved again until the proper temperature, pressure and residence time were achieved.

(4) **Recording of operational parameters:** Each autoclave shall have graphic or computer recording devices which will automatically and continuously monitor and record dates, time of day, load identification number and operating parameters throughout the entire length of the autoclave cycle.

(5) **Validation test for autoclave:** The validation test shall use four biological indicator strips, one shall be used as a control and left at room temperature, and three shall be placed in the approximate center of three containers with the waste. Personal protective equipment (gloves, face mask and coveralls) shall be used when opening containers for the purpose of placing the biological indicators. At least one of the containers with a biological indicator should be placed in the most difficult location for steam to penetrate, generally the bottom center of the waste pile. The occupier or operator shall conduct this test three consecutive times to define the

minimum operating conditions. The temperature, pressure and residence time at which all biological indicator vials or strips for three consecutive tests show complete inactivation of the spores shall define the minimum operating conditions for the autoclave. After determining the minimum temperature, pressure and residence time, the occupier or operator of a common biomedical waste treatment facility shall conduct this test once in three months and records in this regard shall be maintained.

(6) **Routine Test:** A chemical indicator strip or tape that changes colour when a certain temperature is reached can be used to verify that a specific temperature has been achieved. It may be necessary to use more than one strip over the waste package at different locations to ensure that the inner content of the package has been adequately autoclaved. The occupier or operator of a common bio medical waste treatment facility shall conduct this test during autoclaving of each batch and records in this regard shall be maintained.

(7) **Spore testing:** The autoclave should completely and consistently kill the approved biological indicator at the maximum design capacity of each autoclave unit. Biological indicator for autoclave shall be *Geobacillusstearothermophilus* spores using vials or spore Strips; with at least 1×10^6 spores. Under no circumstances will an autoclave have minimum operating parameters less than a residence time of 30 minutes, a temperature less than 121°C or a pressure less than 15 psi. The occupier or operator of a common bio medical waste treatment and disposal facility shall conduct this test at least once in every week and records in this regard shall be maintained.

4. STANDARDS OF MICROWAVING.—(1) Microwave treatment shall not be used for cytotoxic, hazardous or radioactive wastes, contaminated animal carcasses, body parts and large metal items.

(2) The microwave system shall comply with the efficacy test or routine tests and a performance guarantee may be provided by the supplier before operation of the limit.

The microwave should completely and consistently kill the bacteria and other pathogenic organisms that are ensured by approved biological indicator at the maximum design capacity of each microwave unit. Biological indicators for microwave shall be *Bacillus atrophaeusspores* using vials or spore strips with at least 1×10^4 spores per detachable strip. The biological indicator shall be placed with waste and exposed to same conditions as the waste during a normal treatment cycle.

5. STANDARDS FOR DEEP BURIAL.— (1) A pit or trench should be dug about two meters deep. It should be half filled with waste, then covered with lime within 50 cm of the surface, before filling the rest of the pit with soil.

(2) It must be ensured that animals do not have any access to burial sites. Covers of galvanised iron or wire meshes may be used.

(3) On each occasion, when wastes are added to the pit, a layer of 10 cm of soil shall be added to cover the wastes.

(4) Burial must be performed under close and dedicated supervision.

(5) The deep burial site should be relatively impermeable and no shallow well should be close to the site.

(6) The pits should be distant from habitation, and located so as to ensure that no contamination occurs to surface water or ground water. The area should not be prone to flooding or erosion.

(7) The location of the deep burial site shall be authorised by the prescribed authority.

(8) The institution shall maintain a record of all pits used for deep burial.

(9) The ground water table level should be a minimum of six meters below the lower level of deep burial pit.

6. STANDARDS FOR EFFICACY OF CHEMICAL DISINFECTION.—

Microbial inactivation efficacy is equated to "Log₁₀ kill" which is defined as the difference between the logarithms of number of test microorganisms before and after chemical treatment. Chemical disinfection methods shall demonstrate a 4 Log₁₀ reduction or greater for *Bacillus Subtilis* (ATCC 19659) in chemical treatment systems.

7. STANDARDS FOR DRY HEAT STERILIZATION.—

Waste sharps can be treated by dry heat sterilization at a temperature not less than 185°C , at least for a residence period of 150 minutes in each cycle, which sterilization period of 90 minutes. There should be automatic recording system to monitor operating parameters.

(i) Validation test for Sharps sterilization unit

Waste sharps sterilization unit should completely and consistently kill the biological indicator *GeobacillusStearothermophilus* or *Bacillus Atropheausspoers* using vials with at least $\log_{10} 6$ spores per ml. The test shall be carried out once in three months

(ii) Routine test

A chemical indicator strip or tape that changes colour when a certain temperature is reached can be used to verify that a specific temperature has been achieved. It may be necessary to use more than one strip over the waste to ensure that the inner content of the sharps has been adequately disinfected. This test shall be performed once in week and records in this regard shall be maintained.

8. STANDARDS FOR LIQUID WASTE.— (1) The effluent generated or treated from the premises of occupier or operator of a common bio medical waste treatment and disposal facility, before discharge into the sewer should conform to the following limits-

PARAMETERS	PERMISSIBLE LIMITS
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pH	6.5-9.0
Suspended solids	100 mg/l
Oil and grease	10 mg/l
BOD	30 mg/l
COD	250 mg/l
Bio-assay test	90% survival of fish after 96 hours in 100% effluent.

²³[Note—

1. Above limits are applicable to the occupiers of Health Care Facilities (bedded) which are either connected with sewerage network without terminal sewage treatment plant or not connected to public sewers.
2. 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.

²⁴[3. Health Care Facilities having less than ten beds shall have to comply with the output discharge standard for liquid waste by 31st December, 2019.]

4. Non-bedded occupiers shall dispose infectious liquid wastes only after treatment by disinfection as per Schedule II(6) of the principal rules.]

(2) Sludge from Effluent Treatment Plant shall be given to common bio-medical waste treatment facility for incineration or to hazardous waste treatment, storage and disposal facility for disposal.

SCHEDULE III

[See Rule 6 and 9(3)]

List of Prescribed Authorities and the Corresponding Duties

Sl. No. (1)	Authority (2)	Corresponding Duties (3)
1	Ministry of Environment, Forest and Climate Change, Government of India	<p>(i) Making Policies concerning bio-medical waste Management in the Country including notification of Rules and amendments to the Rules as and when required.</p> <p>(ii) Providing financial assistance for training and awareness programmes on bio-medical waste management related activities to for the State Pollution Control Boards or Pollution Control Committees.</p> <p>(iii) Facilitating financial assistance for setting up or up-gradation of common bio-medical waste treatment facilities.</p> <p>(iv) Undertake or support operational research and assessment with reference to risks to environment and health due to bio-medical waste and previously unknown disposables and wastes from new types of equipment.</p> <p>(v) Constitution of Monitoring Committee for implementation of the rules.</p> <p>(vi) Hearing Appeals and give decision made in Form- V against order passed by the prescribed authorities.</p> <p>(vii) Develop Standard manual for Trainers and Training.</p> <p>(viii) Notify the standards or operating parameters for new technologies for treatment of bio medical waste other than those listed in Schedule- I.</p>
2	Central or State Ministry of Health and Family Welfare, Central Ministry for Animal Husbandry and Veterinary or State Department of Animal Husbandry and Veterinary.	<p>(i) Grant of license to health care facilities or nursing homes or veterinary establishments with a condition to obtain authorisation from the prescribed authority for bio-medical waste management.</p> <p>(ii) Monitoring, Refusal or Cancellation of license for health care facilities or nursing homes or veterinary establishments for violations of conditions of authorisation or provisions under these Rules.</p> <p>(iii) Publication of list of registered health care facilities with regard to bio-medical waste generation, treatment and disposal.</p> <p>(iv) Undertake or support operational research and assessment with reference to risks to environment and health due to bio-medical waste and previously unknown disposables and wastes from new types of equipment.</p> <p>(v) Coordinate with State Pollution Control Boards for organizing training programmes to staff of health care facilities and municipal workers on bio-medical waste.</p> <p>(vi) Constitution of Expert Committees at National or State level for</p>

		<p>overall review and promotion of clean or new technologies for bio-medical waste management.</p> <p>(vii) Organizing or Sponsoring of trainings for the regulatory authorities and health care facilities on bio-medical waste management related activities.</p> <p>(viii) Sponsoring of mass awareness campaigns in electronic media and print media.</p>
3	Ministry of Defence	<p>(i) Grant and renewal of authorisation to Armed Forces health care facilities or common bio-medical waste treatment facilities ²⁵ [(Rule 10)].</p> <p>(ii) Conduct training courses for authorities dealing with management of bio-medical wastes in Armed Forces health care facilities or treatment facilities in association with State Pollution Control Boards or Pollution Control Committees or Central Pollution Control Board or Ministry of Environment, Forest and Climate Change.</p> <p>(iii) Publication of inventory of occupiers and bio-medical waste generation from Armed Forces health care facilities or occupiers</p> <p>(iv) Constitution of Advisory Committee for implementation of the rules.</p> <p>(v) Review of management of bio-medical waste generation in the Armed Forces health care facilities through its Advisory Committee (Rule 11).</p> <p>(vi) Submission of annual report to Central Pollution Control Board within the stipulated time period (Rule 13).</p> <p>²⁶[(vii)] ²² Inspection and monitoring of Medical Inspection (MI) rooms, sick bays onboard ships or submarines, station medical centres and field hospitals in forward locations operated by the Director General, Armed Force Medical Services.]</p>
4.	Central Pollution Control Board	<p>(i) Prepare Guidelines on bio-medical waste Management and submit to the Ministry of Environment, Forest and Climate Change.</p> <p>(ii) Co-ordination of activities of State Pollution Control Boards or Pollution Control Committees on bio-medical waste.</p>
		<p>(iii) Conduct training courses for authorities dealing with management of bio-medical waste.</p> <p>(iv) Lay down standards for new technologies for treatment and disposal of bio-medical waste (Rule 7) and prescribe specifications for treatment and disposal of bio-medical wastes (Rule 7).</p> <p>(v) Lay down Criteria for establishing common bio-medical waste treatment facilities in the Country.</p> <p>(vi) Random inspection or monitoring of health care facilities and common bio-medical waste treatment facilities.</p> <p>(vii) Review and analysis of data submitted by the State Pollution Control Boards on bio-medical waste and submission of compiled information in the form of annual report along with its observations to Ministry of Environment, Forest and Climate Change .</p> <p>²⁹[(viii)] Inspection and monitoring of health care facilities other than Medical Inspection (MI) rooms, sick bays on board ships or submarines, station medical centres and field hospitals in forward locations operated by the Director General, Armed Forces Medical Services (Rule-9).]</p> <p>(ix) Undertake or support research or operational research regarding bio-medical waste.</p>
5.	State Government of Health or Union Territory Government or Administration	<p>(i) To ensure implementation of the rule in all health care facilities or occupiers.</p> <p>(ii) Allocation of adequate funds to Government health care facilities for bio-medical waste management.</p> <p>(iii) Procurement and allocation of treatment equipments and make provision for consumables for bio-medical waste management in Government health care facilities.</p>

		(iv) Constitute State or District Level Advisory Committees under the District Magistrate or Additional District Magistrate to oversee the bio-medical waste management in the Districts. (v) Advise State Pollution Control Boards or Pollution Control Committees on implementation of these Rules. (vi) Implementation of recommendations of the Advisory Committee in all the health care facilities.
6.	State Pollution Control Boards or Pollution Control Committees	(i) Inventorisation of Occupiers and data on bio-medical waste generation, treatment & disposal. (ii) Compilation of data and submission of the same in annual report to Central Pollution Control Board within the stipulated time period. (iii) Grant and renewal, suspension or refusal cancellation or of authorisation under these rules (Rule 7, 8 and 10). (iv) Monitoring of compliance of various provisions and conditions of authorisation. (v) Action against health care facilities or common bio-medical waste treatment facilities for violation of these rules (Rule 18). (vi) Organizing training programmes to staff of health care facilities and common bio-medical waste treatment facilities and State Pollution Control Boards or Pollution Control Committees Staff on segregation, collection, storage, transportation, treatment and disposal of bio-medical wastes.
		(vii) Undertake or support research or operational research regarding bio-medical waste management. (viii) Any other function under these rules assigned by Ministry of Environment, Forest and Climate Change or Central Pollution Control Board from time to time. (ix) Implementation of recommendations of the Advisory Committee. (x) Publish the list of Registered or Authorised (or give consent) Recyclers. (xi) Undertake and support third party audits of the common bio-medical waste treatment facilities in their State.
7	Municipalities or Corporations, Urban Local Bodies and Gram Panchayats	(i) Provide or allocate suitable land for development of common bio-medical waste treatment facilities in their respective jurisdictions as per the guidelines of Central Pollution Control Board. (ii) Collect other solid waste (other than the bio-medical waste) from the health care facilities as per the Municipal Solid Waste (Management and handling) Rules, 2000 or as amended time to time. (iii) Any other function stipulated under these Rules.

SCHEDULE IV

[See Rule 8(3) and (5)]

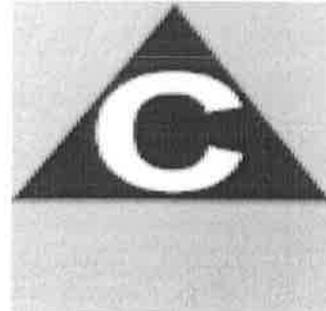
Part A

LABEL FOR BIO-MEDICAL WASTE CONTAINERS or BAGS



HANDLE WITH CARE

CYTOTOXIC HAZARD SYMBOL



HANDLE WITH CARE

Part B

LABEL FOR TRANSPORTING BIO-MEDICAL WASTE BAGS OR CONTAINERS

Day Month.....

Year.....

Date of generation.....

Waste category Number

Waste quantity.....

Sender's Name and Address

Phone Number

Receiver's Name and Address:

Phone Number.....

Fax Number

Contact Person

Fax Number.....

Contact Person.....

In case of emergency please contact:

Name and Address:

Phone No.

Note :Label shall be non-washable and prominently visible.

FORM I

[(See Rule 4(o), 5(i) and 15 (2))

ACCIDENT REPORTING

1. Date and time of accident:
2. Type of Accident:
3. Sequence of events leading to accident:
4. Has the Authority been informed immediately:
5. The type of waste involved in accident:
6. Assessment of the effects of the accidents on human health and the environment:
7. Emergency measures taken:
8. Steps taken to alleviate the effects of accidents:
9. Steps taken to prevent the recurrence of such an accident:
10. Does your facility has an Emergency Control policy? If yes give details:

Date:..... Signature

Place: Designation

FORM II

(See Rule 10)

APPLICATION FOR AUTHORISATION OR RENEWAL OF AUTHORISATION

(To be submitted by occupier of health care facility or common bio-medical waste treatment facility)

To

The Prescribed Authority
(Name of the State or UT Administration)



Address.

1. Particulars of Applicant:

- (i) Name of the Applicant:
(In block letters & in full)
- (ii) Name of the health care facility (HCF) or common bio-medical waste treatment facility (CBWTF):
- (iii) Address for correspondence:
- (iv) Tele No., Fax No.:
- (v) Email:
- (vi) Website Address:

2. Activity for which authorisation is sought:

Please tick

- Activity
- Generation, segregation
- Collection,
- Storage
- packaging
- Reception
- Transportation
- Treatment or processing or conversion
- Recycling
- Disposal or destruction
- use

offering for sale, transfer

Any other form of handling

3. Application for fresh or renewal of authorisation (please tick whatever is applicable):

- (i) Applied for CTO/CTE Yes/No
- (ii) In case of renewal previous authorisation number and date:

(iii) Status of Consents:

(a) under the Water (Prevention and Control of Pollution) Act, 1974

(b) under the Air (Prevention and Control of Pollution) Act, 1981:

- 4. (i) Address of the health care facility (HCF) or common bio-medical waste treatment facility (CBWTF):
- (ii) GPS coordinates of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF):

5. Details of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF):

- (i) Number of beds of HCF:
- (ii) Number of patients treated per month by HCF:
- (iii) Number healthcare facilities covered by CBMWTF: _____
- (iv) No of beds covered by CBMWTF: _____
- (v) Installed treatment and disposal capacity of CBMWTF: _____ Kg per day
- (vi) Quantity of biomedical waste treated or disposed by CBMWTF: _____ Kg/ day
- (vii) Area or distance covered by CBMWTF: _____

(pl. attach map a map with GPS locations of CBMWTF and area of coverage)

(viii) Quantity of Biomedical waste handled, treated or disposed:

Category	Type of Waste	Quantity Generated or Collected, kg/day	Method of Treatment and Disposal (Refer Schedule-I)
(1)	(2)	(3)	(4)
Yellow	(a) Human Anatomical Waste:		
	(b) Animal Anatomical Waste:		
	(c) Soiled Waste:		
	(d) Expired or Discarded Medicines:		
	(e) Chemical Solid Waste:		
	(f) Chemical Liquid Waste:		
	(g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.		



	(h) Microbiology, Biotechnology and other clinical laboratory waste:		
Red	Contaminated Waste (Recyclable)		
White (Translucent)	Waste sharps including Metals:		
Blue	Glassware:		
	Metallic Body Implants		

6. Brief description of arrangements for handling of biomedical waste (attach details):

(i) Mode of transportation (if any) of bio-medical waste:

(ii) Details of treatment equipment (please give details such as the number, type & capacity of each unit)

No of units Capacity of each unit

Incinerators:

Plasma Pyrolysis:

Autoclaves:

Microwave:

Hydroclave:

Shredder:

Needle tip cutter or destroyer

Sharps encapsulation or concrete pit:

Deep burial pits:

Chemical disinfection:

Any other treatment equipment:

7. Contingency plan of common bio-medical waste treatment facility (CBWTF)(attach documents):

8. Details of directions or notices or legal actions if any during the period of earlier authorisation

9. Declaration

I do hereby declare that the statements made and information given above are true to the best of my knowledge and belief and that I have not concealed any information.

I do also hereby undertake to provide any further information sought by the prescribed authority in relation to these rules and to fulfill any conditions stipulated by the prescribed authority.

Signature of the Applicant

Designation of the Applicant

Date:

Place:

FORM III

(See Rule 10)

AUTHORISATION

(Authorisation for operating a facility for generation, collection, reception, treatment, storage, transport and disposal of biomedical wastes)

1. File number of authorisation and date of issue.....

2. M/s _____ an occupier or operator of the facility located at _____ is hereby granted an authorisation for;

Please tick

Activity

Generation, segregation

Collection,

Storage

packaging

Reception

Transportation

Treatment or processing or conversion

Recycling

Disposal or destruction

use

offering for sale, transfer

Any other form of handling

3. M/s _____ is hereby authorized for handling of biomedical waste as per the capacity given below;

(i) Number of beds of HCF:

- (ii) Number healthcare facilities covered by CBMWTF: _____
- (iii) Installed treatment and disposal capacity: _____ Kg per day
- (iv) Area or distance covered by CBMWTF: _____

(v) Quantity of Biomedical waste handled, treated or disposed:

- Type of Waste Category
- Quantity permitted for Handling
- Yellow
- Red
- White (Translucent)
- Blue

4. This authorisation shall be in force for a period of Years from the date of issue.

5. This authorisation is subject to the conditions stated below and to such other conditions as may be specified in the rules for the time being in force under the Environment (Protection) Act, 1986.

Date Signature.....
Place: Designation

Terms and conditions of authorisation*

1. The authorisation shall comply with the provisions of the Environment (Protection) Act, 1986 and the rules made there under.
2. The authorisation or its renewal shall be produced for inspection at the request of an officer authorised by the prescribed authority.
3. The person authorized shall not rent, lend, sell, transfer or otherwise transport the biomedical wastes without obtaining prior permission of the prescribed authority.
4. Any unauthorised change in personnel, equipment or working conditions as mentioned in the application by the person authorised shall constitute a breach of his authorisation.
5. It is the duty of the authorised person to take prior permission of the prescribed authority to close down the facility and such other terms and conditions may be stipulated by the prescribed authority.

FORM IV

(See Rule 13)

ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	
	(ii) Name of HCF or CBMWTF	:	
	(iii) Address for Correspondence	:	
	(iv) Address of Facility	:	
	(v) Tel. No, Fax. No	:	
	(vi) E-mail ID	:	
	(vii) URL of Website	:	
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: Valid up to
(xi). Status of Consents under Water Act and Air Act	:	Valid up to:	
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:.....
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	
3.	Details of CBMWTF	:	

	(i) Number healthcare facilities covered by CBMWTF	:																																																	
	(ii) No of beds covered by CBMWTF	:																																																	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day																																																
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category: Red Category: White: Blue Category: General Solid waste:																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	Size: Capacity: Provision of on-site storage : (cold storage or any other provision)																																																
	disposal facilities		<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td>-</td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td>-</td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer		-		Sharps encapsulation or concrete pit		-		Deep burial pits:		-		Chemical disinfection:		-		Any other treatment equipment:		-	
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Chemical disinfection:		-																																																	
Any other treatment equipment:		-																																																	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)																																																
	(iv) No of vehicles used for collection and transportation of biomedical waste	:																																																	
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		<table border="1"> <thead> <tr> <th>Incineration Ash</th> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>ETP Sludge</td> <td></td> <td></td> </tr> </tbody> </table>	Incineration Ash	Quantity generated	Where disposed	ETP Sludge																																												
Incineration Ash	Quantity generated	Where disposed																																																	
ETP Sludge																																																			
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:																																																	
	(vii) List of member HCF not handed over bio-medical waste.	:																																																	
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	:																																																	
7	Details trainings conducted on BMW																																																		
	(i) Number of trainings conducted on BMW Management.	:																																																	
	(ii) number of personnel trained	:																																																	
	(iii) number of personnel trained at the time of induction	:																																																	
	(iv) number of personnel not undergone	:																																																	

	any training so far (v) whether standard manual for training is available? (vi) any other information)		
8	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) (iv) Any Fatality occurred, details.		
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		
10	Details of Continuous online emission monitoring systems installed		
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		
13	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

.....
Name and Signature of the Head of the Institution

Date:

Place

²⁹[FORM IV-A

[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 Organisation :
- (2) Name of the Nodal Officer with contact telephone number and e-mail :
- (3) Total no. of Health Care Facilities/Occupiers :
 - (i) Bedded Hospitals and Nursing Homes (bedded) :
 - (ii) Clinics, dispensaries: :
 - (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 :
- (5) Status of authorisation :
 - (i) Total number of Occupiers applied for authorisation :
 - (ii) Total number of Occupiers granted authorisation :
 - (iii) Total number of application under consideration :
 - (iv) Total number of applications rejected :
 - (v) Total number of Occupiers in operation without applying for authorisation :

- (6) Quantity of Bio-medical Waste Generation (in kg/day) :
 (Please enclose District Wise Bio-medical Waste Generation as per Part 2)
 - (i) Bio-medical waste generation by bedded hospitals (in kg/day) :
 - (ii) Bio-medical waste generation by non-bedded hospitals (in kg/day) :
 - (iii) Any other: _____

Total : Kg/day
- (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)
 - (i) Number of Health Care Facilities having captive treatment and Disposal facilities :
 - (ii) Total bio-medical waste treated and disposed by captive treatment facilities in kg/day :
 - (b) Bio-medical waste treatment and disposal by Common Bio Medical Waste Treatment Facilities (please enclose details as per Part 4)
 - (i) Number of Common Bio Medical Waste Treatment Facilities in Operation :
 - (ii) Number of Common Bio Medical Waste Treatment Facilities under construction :
 - (iii) Total bio-medical waste treated in kg/day:
 - (iv) Total treated bio-medical waste disposed through authorised recyclers (in Kg/day): _____
- (8) Total no. of violation by:
 - (i) Health Care Facilities (bedded and non-bedded): _____
 - (ii) Common Bio Medical Waste Treatment Facilities: _____
 - (iii) Others (please specify): _____
- (9) Show cause notices/directions issued to defaulters:
 - (i) Health Care Facilities (bedded and non-bedded): _____
 - (ii) Common Bio Medical Waste Treatment Facilities: _____
 - (iii) Others: _____
- (10) Any other relevant information:
 - (i) Number of workshops/trainings conducted during the year _____ :
 - (ii) Number of occupiers installed liquid waste treatment facility _____ :
 - (iii) Number of captive incinerators complying to the norms _____ :
 - (iv) Number of occupiers organised trainings _____ :
 - (v) Number of occupiers constituted Bio-medical Waste Management Committees _____ :
 - (vi) Number of occupiers submitted Annual Report for the previous calendar year _____ :
 - (vii) Number of occupiers practising pre-treatment of lab microbiology and Bio-technology waste _____ :
 - (viii) Number of Common Bio Medical Waste Treatment Facilities that have installed Continuous Online Emission Monitoring Systems _____ :

Part 2: District-wise Bio-medical Waste Generation (for the previous calendar year

Sl. No.	Name of the State/ Union Territory	Name of the District	Bio-medical Waste Generation (in Kg/day)	Existing Total bio-medical waste treatment capacity (both captive and CBMWTF) in kg/day	
				Equipment	Total
				Incinerator:	
				Autoclave:	
				Deep	
				Burial:	
				Any other:	

Part 3 : Information on Health Care Facilities having captive treatment facilities (for the previous calendar Year

Sl.	Name and	Quantity of Bio-medical Waste	Total Installed Treatment	Total bio-
-----	----------	-------------------------------	---------------------------	------------

No.	address of the Health Care Facility	Generation (in kg/day)					Total bio-medical waste generated (in kg/day)	Capacity in kg/day				medical waste treated and disposed by Health Care Facilities in kg/day
		Yellow	Red	Blue	White	Incinerator		Auto-clave	Deep Burial	Any other		
												Incinerator
												Autoclave:
												Deep
												Burial:
												Any other:
												Total:

Part 4: Information on Common Bio-Medical Waste Treatment and Disposal Facilities (for the previous calendar Year

Sl. No.	Name and Address of the Common Bio-Medical Waste Treatment Facilities with contact person name and telephone number	GPS Coordinates	Coverage Area in KMS	Name of the cities/ areas covered by Common Bio-Medical Waste Treatment Facilities	Total number of Health Care Facilities being covered	Total number of beds covered	Total Quantity of Bio-Medical Waste collected from member Health Care Facilities (in Kg/day)	Capacity of Treatment equipments installed by Common Bio Medical Waste Treatment Facilities			Total Bio-Medical waste treated in kg/day	Method of Disposal of treated wastes (Incineration Ash/ Sharps/ Plastics)
								Equipment	Number	Total Installed capacity (kg/day)		
								Incinerator				Incineration Ash: Quantity: Disposed by: Sharps: Quantity: Disposed by: Plastics: Quantity: Disposed by: Sharps encapsulation or concrete pit Deep burial pits Any other equipment Effluent Treatment ETP Sludge: Quantity:
								Plasma Pyrolysis				
								Autoclave				
								Hydro-clave				
								Micro-wave				
								Shredder				
								Sharps encapsulation or concrete pit				
								Deep burial pits				
								Any other equipment				
								Effluent Treatment				

	Plant	Disposed by:
	Sub-total	
(a)	Total Number of transportation vehicles used for collection of Bio-medical Waste on daily basis by the Common Bio-Medical Waste Treatment Facilities:	
(b)	List of Health Care Facilities not having membership with the Common Bio-Medical Waste Treatment Facilities and neither having captive treatment facilities:	
(c)	Number of trainings organised by the Common Bio-Medical Waste Treatment Facility operators:	
(d)	Number of Accidents reported by the Common Bio-Medical Waste Treatment Facility:]	

FORM V

(See Rule 16)

Application for filing appeal against order passed by the prescribed authority

1. Name and address of the person applying for appeal:
2. Number, date of order and address of the authority which passed the order, against which appeal is being made (certified copy of order to be attached):
3. Ground on which the appeal is being made:
4. List of enclosures other than the order referred in para 2 against which appeal is being filed:

Signature

Name and Address.....

Date: _____

¹. Ministry of Environment, Forest and Climate Change, Noti. No. G.S.R. 343(E), dated March 28, 2016 and published in the Gazette of India, Extra., Part II, Section 3(i), dated 28th March, 2016, pp. 39-63, No. 197.

². Subs. for "Municipal Solid Waste (Management and Handling) Rules, 2000" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

³. Subs. for "Hazardous Wastes (Management, Handling and Transboundary Movement) Rules, 2008" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

⁴. Subs. for "e-Waste (Management and Handling) Rules, 2011" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

⁵. Subs. for "or National AIDS Control Organisation (NACO) guidelines and then sent to the common bio-medical waste treatment facility for final disposal" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

⁶. Subs. by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018). Prior to substitution it read as:
"(d) phase out use of chlorinated plastic bags, gloves and blood bags within two years from the date of notification of these rules;"

⁷. Ins. by G.S.R. 360(E), dt. 10-5-2019 (w.e.f. 13-5-2019).

⁸. Subs. for "place for any purpose within one year from the date of the notification of these rules;" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

⁹. Subs. by G.S.R. 129(E), dt. 19-8-2019 (w.e.f. 20-2-2019). Prior to substitution it read as:
"(n) maintain and update on day to day basis the bio-medical waste management register and display the monthly record on its website according to the bio-medical waste generated in terms of category and colour coding as specified in Schedule 1;"

¹⁰. Subs. by G.S.R. 129(E), dt. 19-8-2019 (w.e.f. 20-2-2019). Prior to substitution it read as:
"(p) all the health care facilities (any number of beds) shall make available the annual report on its web site within a period of two years from the date of publication of Bio-Medical Waste Management (Amendment) Rules, 2018;"

¹¹. Subs. for "within one year" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹². Subs. for "phase out use of non-chlorinated plastic bags" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹³. Subs. for "the Plastic Waste Management Rules, 2011" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹⁴. Subs. for "Central Pollution Control Board on or before" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹⁵. Ins. by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹⁶. Subs. for "Autoclave safe plastic bags or containers" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹⁷. Subs. for "as per National AIDS Control Organisation or World Health Organisation guidelines thereafter for Incineration" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹⁸. Subs. for "Cardboard boxes with blue colored marking" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

¹⁹. Subs. for "Cardboard boxes with blue colored marking" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

²⁰. Subs. for "Schedule III" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

²¹. Subs. for "10%" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

²². Subs. for "mg Nm³" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

²³. Ins. by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

²⁴. Subs. by G.S.R. 129(E), dt. 19-8-2019 (w.e.f. 20-2-2019). Prior to substitution it read as:
"3. Health Care Facilities having less than ten beds shall have to install Sewage Treatment Plant by the 31st December, 2019."

²⁵ *Subs.* for "(Rule 9)" by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

²⁶ *Ins.* by G.S.R. 129(E), dt. 19-8-2019 (w.e.f. 20-2-2019).

²⁷ *Subs.* for "(viii)" by G.S.R. 360(E), dt. 10-5-2019 (w.e.f. 13-5-2019).

²⁸ *Subs.* by G.S.R. 129(E), dt. 19-8-2019 (w.e.f. 20-2-2019). Prior to substitution it read as:
"(viii) Inspection and monitoring of health care facilities operated by the Director General, Armed Forces Medical Services [(Rule 12)]"

²⁹ *Ins.* by G.S.R. 234(E), dt. 16-3-2018 (w.e.f. 16-3-2018).

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