



To,

Date:17-07-2025

Regional Officer (city)  
Rajasthan Pollution Control Board

Subject: - Regarding Biomedical Waste Yearly Report Submission

Respected Sir/Madam,

We have attached form 4 & yearly biomedical waste generation report along with this cover letter for the year 2024. Requesting you to accept and provide receiving on the same.

Authorized Signatory

Mr. Ankit Pareek  
(Chief Administrative Officer)



**SHALBY HOSPITAL**

Sector-3, Near Gandhi Path Underpass, 200 Ft Bypass, Chitrakoot, Vaishali Nagar, Jaipur-302 021.

Tel: 0141-7123889 | Email: info.jaipur@shalby.org

CIN: L85110GJ2004PLC044667

Regd. Office: Shalby Limited, Opp. Karnavati Club, S.G. Road, Ahmedabad - 380 015, Gujarat, India

Tel: 079 40203000 | Fax: 079 40203109 | Email: info.sg@shalby.org | www.shalby.org

Ahmedabad - Vapi - Indore - Jabalpur - Mohali - Surat Upcoming Hospitals: Mumbai - Nashik

**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)]

Sl. No	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Mr. Ankit Parveek
	(ii) Name of Health Care Facility		Shalby Limited
	(iii) Address for Correspondence		Sec-3, Chitrakoot Scheme, Vaishali Nagar
	(iv) Address of Facility		Jaipur
	(v) Tel. No, Fax. No		
	(vi) E-mail ID		cao.jaipur@shalby.org
	(vii) URL of Website		www.shalby.org
	(viii) GPS coordinates of Health Care Facility		
	(ix) Ownership of Health Care Facility		(State Government or Private or Semi Govt. or any other) HCF (Private)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules		Authorisation No.: BMW/2022-23/BMW/13 .....valid up to ...30/04/2027
	(xi). Status of Consents under Water Act and Air Act		Valid up to: 30/04/2027
2	Type of Health Care Facility	:	HCF (Private Hospital)
	(i) Bedded Hospital	:	No. of Beds: .....240
	(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		F/DMW/Jaikur/124(1)/2017-2018/2253. 2255																																
3	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category :																																
			Red Category :																																
			White:																																
			Blue Category :																																
			General Solid waste:																																
4	Details of the Storage, treatment, transportation, processing and Disposal Facility																																		
	(i) Details of the on-site storage facility		Size : 6 X 10																																
			Capacity : 150 Kg																																
			Provision of on-site storage : (cold storage or any other provision)																																
	(ii) 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> </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			
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			Sharps Encapsulation or concrete pit			
			Deep burial pits			
			Chemical disinfection			
			Any other treatment equipment			
	(iii) Quantity of recyclable wastes sold to authorised recyclers after treatment in kg per annum.		Red Category (like plastic, glass etc.)  Nil			
	(iv) No of vehicles used for collection and transportation of biomedical waste		Nil			
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Incineration & Ash ETP Sludge	Quantity Generated	where Disposed	
	(vii) List of member HCF not handed over bio-medical waste.		NA			
5	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Yes			
6	Details trainings conducted on BMW					
	(i) Number of trainings conducted on BMW Management.		35			
	(ii) number of personnel trained		85			
	(iii) number of personnel trained at the time of induction		36			
	(iv) number of personnel not undergone any training so far		NA			
	(v) whether standard manual for					

	training is available?		Yes
	(vi) any other information)		
7	Details of the accident occurred during the year		No
	(i) Number of Accidents occurred		No
	(ii) Number of the persons affected		No
	(iii) Remedial Action taken (Please attach details if any)		-
	(iv) Any Fatality occurred, details.		-
8	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		-
	Details of Continuous online emission monitoring systems installed		-
9	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		10%. Sodium Hypochloride Treated
10	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		
11	Any other relevant information		(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

..... 01/01/2024 ..... To ..... 31/12/2024 .....

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.....

.....

Institution

Name and Signature of the Head of the

*[Signature]*

Date: 17/7/25

Place JAIPUR

**Bio-Medical Waste Collection Report 2024**

Sr. No.	Month	Red	Yellow	Blue	White
1	Jan-24	575	908	440	32
2	Feb-24	540	890	460	35
3	Mar-24	522	977	456	28
4	Apr-24	498	915	397	30
5	May-24	478	955	390	31
6	Jun-24	489	918	450	29
7	Jul-24	541	950	478	27
8	Aug-24	532	876	444	26
9	Sep-24	512	854	487	21
10	Oct-24	463	845	476	34
11	Nov-24	476	877	376	33
12	Dec-24	490	854	396	28
	Total=	6116	10819	5250	354