

## ANNEXURE-III

### **Structured Questionnaire for Hazardous Waste Generators (Industry Specific)**

#### **PART A: BASIC INFORMATION:**

Name of the industry:	
Year of Establishment:	
No. of years in operation:	
Address:	
City/town/pin code:	
Contact person details	Name:
	Designation:
	Tel/Mobile No:
	E-mail id:
	Fax:
Registered office details	Address:
	Tel/Mobile No:
	E-mail id:
	Fax:
Name of the Chairman/MD/Proprietor:	
Distance from TSDF:	

**PART B: INDUSTRY DETAILS:**

**1: NATURE OF INDUSTRY**

Scale:	LSI (Large scale) ( ) MSI (Medium scale) ( ) SSI (Small scale) ( )		
Category:	Red ( )	Orange ( )	Green ( )
Type: (Strike only that is applicable)	( ) Automobile / Ancillaries	Pharmaceutical/ Bulk drug ( )	
	( ) Chemical (organic/ inorganic)	Petrochemical ( )	
	( ) Electroplating	Textile/ Soap Industry ( )	
	( ) Electronics	Refineries ( )	
	( ) Engineering	Mining ( )	
	( ) Fertilizers	Food processing ( )	
	Others:-		

**2: AUTHORIZATION FROM THE STATE POLLUTION CONTROL BOARD (PCB) UNDER HW RULES**

Authorization No:	
Date of Issue:	
Valid up to:	

### 3: PRODUCT DETAILS

1.	Type of industry:	
a.	Products & range:	
b.	Rated capacity:	
2.	Attachment of material balance (annexed):	
3.	Raw materials used/ month (attach additional sheets if necessary)	Quantity/month
	1.	
	2.	
	3.	
	4.	
4.	<ul style="list-style-type: none"> <li>Process description:</li> </ul>	
5.	<ul style="list-style-type: none"> <li>Attach storage layout including access routes (annexed):</li> </ul>	
	<ul style="list-style-type: none"> <li>Submit Quality test reports (annexed):</li> </ul>	
	<ul style="list-style-type: none"> <li>Submit packaging/container systems followed:</li> </ul>	
6.	Specify weight of each unit container per category:	
7.	Total quantity of each type waste:	
8.	Emergency management plan/procedures in case of spillages:	

9.	How much is accumulated so far:	
10.	Waste transported last year and transported to whom:	
11.	Is there a system of recycling hazardous waste and how is it done, specify for each category:	
12.	Describe any modernization or 3 r policy proposed to be undertaken:	
13.	Specify if there are any plans to change the category or quantity & quality of hazardous waste:	

#### **4: TOTAL CONSUMPTION**

Sl. No.	Particulars	Units	Quantity	Amount
1	Energy	KWH		
2	Water	KL		
3	Manpower	Nos		

## 5: WASTE DETAILS

Waste Frequency:	Weekly ( ) Daily ( ) Monthly ( ) Quarterly ( ) Project ( )	Others ( )	
Storage Facility:	Yes ( ) No ( ) Capacity ( ) Days ( ) Monthly ( )	Others ( )	

Sl.No.	Type of waste	Category as per GSPCB consent	Physical state	Quantity	Method of storage	Disposed to State/UT	Disposed quantity (MT)
			(Solid/Semi Solid/Liquid)	(MTPA)			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
Total							
Any other Information: -							

**Note:** Treatment methods for different categories of waste are 1. Direct Landfill (**DLF**), 2. Landfill after treatment (**LAT**), 3. Incineration (**Inc**), 4. Recyclable (**Rec**), 5. Coprocessing (**Cop**), 6. Utilization (**Utl**).

Attach photos of storage, layout plan of storage, leachate storage, sample recording format

## 7: Details on HW stored at occupier premises

Sl. No.	Name of the District	Total quantity of HW stored at Occupier premises at the beginning of the financial year i.e. 01.04.2017 (MT)				Total quantity of HW stored at Occupier premises during the financial year i.e. 1st April to 31st March 2018 (MT)			
		Landfillable	Incinerable	Recyclable	Utilizable	Landfillable	Incinerable	Recyclable	Utilizable
1									
2									
3									
4									
5									

## 8: Annual Inventory w.r.t captive TSDF (s), if existing

Name of SPCB/PCC: \_\_\_\_\_

Year: \_\_\_\_\_

Sl.No.	Name and address of the captive facility	Type of facility (Landfillable, /Incinerable/both)	Capacity		HW disposed during the year	Cumulative HW Disposed till the end of financial year
			Incinerator (T/H)	Landfill (MTA)		
1.						
2.						
3.						
4.						
5.						

### DOCUMENTS TO BE ATTACHED

Copy of GSPCB consent ( )	
Waste sample analysis report if any ( )	

**Place:**

**Date:**

**Authorized Signatory with  
Company seal**

## STORAGE

a	Is incinerable waste storage area provided with separate shed, automatic water sprinkling arrangement, fire alarm system, flame arrestor, smoke detector, and fire extinguisher?	
b	Is the waste labelled, packaged and stored in isolated hazardous waste storage area?	
c	Is the Form 3 under HOWM rules regarding the generation, storage and disposal maintained?	
d	Is the annual report submitted to GSPCB? Attach copy of Hazardous waste annual report.	
e	Is display board installed outside the factory displaying details of Hazardous waste being handled?	
f	Has manifest copy maintained regarding disposal of waste maintained?	

**Place**

**Authorised Signatory with company seal**

**Date**

**Please attach:**

**1.Hazardous waste Annual Report form IV.**