Annual Report as on March 31, 2011

Name of the State Pollution Control Board/Committee : GOA STATE POLLUTION CONTROL BOARD

Name of the Contact Person dealing with Bio-medical Waste Management related with Telephone contact no. & mobile no.: Mr. Sanjeev Joglekar (AEE), (0832)2438528/9158008605

Format for Submission of Annual Report by SPCB/PCC

FORMAL FOR SUCH AND																	
Health Care Facilities	Total	Total	No. of	No. of	No. of	No. of	No. of	Total no. of treatment equipment (excluding CBWTF) Total Qty Total No. of Total no.									
(HCF) under Schedule	no.	no. of	CBWTF/	HCF	HCF	HCF	HCF							of BMW	Qty of	Health	of Show
VI Health	of	Beds	Private	which	having	applied for	granted							generated	BMW	Care	Cause
Care Facilities (HCF)	HCF		agencies	are	treatment	Authorisati	Authorisati							kg/day	treated	Facilities	Notices
under Schedule VI of the				utilising	and	on	on								kg/day	violated	issued to
Rules				CBWTF	disposal											BMW	defaulter
					facilities											Rules	HCF
								Incin	erator	Autoclave	Microwave	Hydroclave	Shredder				
								With Air									
									APCD								
								Control									
								Device									
								(APCD)									
A) Hospitals & Nursing	0																
homes in town with																	
population of 30 lakhs																	
and above																	
B) Hospitals & Nursing																	
homes in town with																	
population below 30																	
lakhs:																	
a) with 500 beds and	1																
b) with 200 beds but less	1																
than 500 beds		4547	NIL	NIL	1	303	299	NIL	1	168	1			4050.87	4050.9	1	1
c) with 50 beds but less	12	4347	TVIL	TVIL	1	303	2))	I	1	100	1			4030.07	1030.7		1
than 200 beds		ļ															
d) with less than 50 beds	286																
C) All other institutions																	
generating bio-medical	3																
waste not included in																	
A) and B)																	
Total	303	4547	NIL	NIL	1	303	299	NIL	1	168	1			4050.87	4050.9	1	1