

Ref: OEL/KOL/2706/03/2022-23

DATE 27.06.2022

To,  
The Chief Engineer (WMC)  
West Bengal Pollution Control Board  
10A, Block LA Sector II.  
Paribesh Bhawan  
Salt Lake  
Kolkata - 700098



**Sub: Submission of Form IV, Annual Report of Bio Medical Waste for the year 2021-22**

Dear Sir,

Please find the enclosed form -IV, Annual Report of Bio Medical Waste for the year 2021-22 for your information and record.

Thanking you

Yours Sincerely,

For Orient electric ltd

*Apratim Das*  
(Apratim Das)



General Manager (operation)

Encl:- As Above

**Form - IV**  
(See rule 13)  
**ANNUAL REPORT**

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)	:	MR. APRATIM DAS GENERAL MANAGER (OPS)
	(ii) Name of HCF or CBMWTF	:	ORIENT ELECTRIC LTD
	(iii) Address for Correspondence	:	6, G. HORE BIBI LANG, KOL-54
	(iv) Address of Facility	:	- do -
	(v) Tel. No, Fax. No	:	
	(vi) E-mail ID	:	apratim.das@orientelectric.com
	(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	:	- NA -
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	- NA -
3.	Details of CBMWTF	:	- NA -
	(i) Number healthcare facilities covered by CBMWTF	:	- NA -
	(ii) No of beds covered by CBMWTF	:	- NA -
	(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 : 2.89 Kg Red Category : 5.86 Kg White: 0.00 Kg Blue Category : 0.50 Kg General Solid waste: -																																																						
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																								
	(i) Details of the on-site storage facility	:	Size : 04 bucket 20 kg capacity Capacity : 80 kg Provision of on-site storage : (cold storage or any other provision)																																																						
	(ii) Details of the treatment or 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</td><td></td><td></td><td></td></tr> <tr><td>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> <p style="text-align: center;">- NA -</p>			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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	(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	:	01																																																						
	(v) Details of incineration ash and ETP sludge generated and disposed	:	- NA -      Quantity generated      Where disposed																																																						

	during the treatment of wastes in Kg per annum		Incineration Ash ETP Sludge
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		- NA - MEDICARE ENVIRONMENTAL MANAGEMENT PVT LTD
	(vii) List of member HCF not handed over bio-medical waste.		- NA -
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		- NA -
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		02
	(ii) number of personnel trained		17
	(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		- NIL -
	(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?		- NA -
	Details of Continuous online emission monitoring systems installed		
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		- NA -
11	Is the disinfection method or sterilization meeting the log 4		- NA -

	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) NA

Certified that the above report is for the period from 01/01/2021 to 31/12/2021

For ORIENT ELECTRIC LTD.

Signature of the Head of the Institution  
General Manager (Operations)

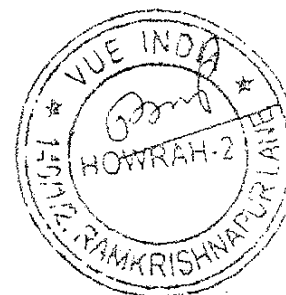
Date: 27/06/2022  
Place: KOLKATA

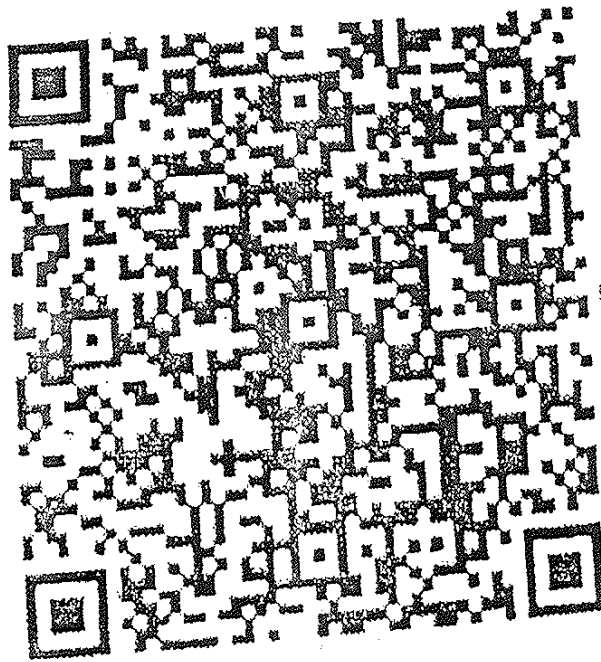
HCF Name : ORIENT ELECTRIC LIMITED(CHOW00002865)  
HCF Address : 6, Ghore Bibi Lane, Kolkata 700054

Summary Report from 01 -01- 2021 to 31-12- 2021

Summary Report

Sl No.	Container Name	Total Scanned Barcode	Total Weight	Weight Unit	Barcode Range
1	Blue	2	0.50	Kg	(3530627B-CH2865 to 3530628B-CH2865)
2	Red	9	5.86	Kg	(3530428R-CH2865 to 3530438R-CH2865)
3	Yellow	8	2.89	Kg	(3530059Y-CH2865 to 3530067Y-CH2865)





**medicare**

*Managing Bio-Medical Wastes*

Orient Electric (A Division  
of Orient Paper &  
Industries Ltd.)()

CHOW00002865

Medicare Environmental  
Management Pvt. Ltd.,  
(Howrah Facility)

41, F - Road, Belgachia,  
Near HMC Hotmix Plant Howrah 711 105

033-26513890, 9088338505

how.bcode@ramky.com

ORIENT ELECTRIC,

# **TRAINING INTIMATION & ATTENDANCE SHEET**

DOC NO. : ORI/TRG-01

ISSUE NO : 01

DATE : 19/8/21

PAGE NO : 01 OF 01

THEME OF TRAINING : Bio medical waste management / Hygiene / Hand Hygiene  
 DATE OF TRAINING : 19/8/21  
 DURATION OF TRAINING : 1 hr  
 FACULTY : Sundeep Banerjee & Arjun Datta  
 VENUE : First Aid Room  
 LIST OF PARTICIPANTS : AS UNDER  
 ON-THE-JOB / OFF- THE-JOB : ON JOB

S. NO.	NAME (Mr. )	CODE NO.	AREA	SIGNATURE	
				INTIMATION	ATTENDANCE
1	SANJAY DAS				SANJAY DAS
2	DWARIKA DAS				DWARIKA DAS
3	GIRIJA DAS				GIRIJA DAS
4	RAJESH DAS				RAJESH DAS
5	AKASH DOME				AKASH DOME
6	Biswanath DAS				Biswanath DAS
7	Arjun Dome	64			Arjun Dome
8	Swapan Adhikari				Swapan Adhikari
9	Atul Das				Atul Das
10	Dinesh Khatiwala				Dinesh Khatiwala
11	ILANDAR MALIK				ILANDAR MALIK
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OBSERVATIONS



ORIENT ELECTRIC,

# **TRAINING INTIMATION & ATTENDANCE SHEET**

DOC NO. ORI/TRG-01

ISSUE NO : 01

DATE :

PAGE NO : 01 OF 01

THEME OF TRAINING

: ~~BE~~ BIO-MEDICAL WASTE MANAGEMENT

DATE OF TRAINING

: 19/6/21

DURATION OF TRAINING

: 1 hr

FACULTY

: ARUN DUTTA

VENUE

: FIRST AID ROOM.

LIST OF PARTICIPANTS

: AS UNDER

ON-THE-JOB / OFF-THE-JOB : ON JOB

S. NO.	NAME (Mr.)	CODE NO.	AREA	SIGNATURE	
				INTIMATION	ATTENDANCE
1	Banjoy Dey	58	Sanitation	S Dey	S Dey
2	Nakesh Das	66	Sanitation	N Dey	N Dey
3	Siva Harijan	645	Sanitation	SHIVAHARIJAN	SHIVAHARIJAN
4	Raj Kumar Das	644	Sanitation	Raj Kumar Das	Raj Kumar Das
5	Anil Hari	640	Sanitation	Anil Hari	Anil Hari
6	Debas Rabindro	676	Sanitation (Supriya)	D R	D R
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OBSERVATIONS

Arjun Dutta  
RMP  
Pg 1969