## Form - IV (See rule 13)

[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)]

SI. No.	Particulars		205	naria:	Market Services	
	Particulars of the Occupier	:	noitsiùagi	son3		
	(i) Name of the authorized person	:	The Superintedent	The Superintedent		
	(ii) Name of HCF or CBMWTF	:	Govt: Taluk Head Quarters Hospital, Tirurangadi			
-	(iii) Address for Correspondence	:	Govt. Taluk Head Quarters Hospital, Chemmad, Tirurangadi Post,			
	(iv) Address of Facility	:	Near Police Station, Chemmad-676306			
	(v)Tel. No, Fax. No	:	4942460372			
	(vi) E-mail ID	:	thqhtirurangadi@gmail.com			
	(vii) URL of Website	:	www.gthqhtirurangadi.com			
	(viii) GPS coordinates of HCF or		2WR6+6WF,Tirurangadi, kerala676306			
	(ix) Ownership of HCF or CBMWTF	:	(State Government			
	(x). Status of Authorization under	11	Authorisation No.:			
	(xi). Status of Consents under	:	Valid upto: January-2023 to December-2023			
	Type of Health Care Facility	:				
_	(i) Bedded Hospital	4:	No. of Beds:157			
	(ii) Non-bedded hospital	:				
	(iii) License number and its date of					
3	Details of CBMWTF		KERALA ENVIRO INFRASTRUCTURE LTD , CBWTF, INSIDE FACT-CD CAMPU AMBALAMEDU, KOCHI-682303, KERALA PH: 0484- 2722241,341 CIN: 424129KL2005PLCO17973, . MAIL ; keilbiomedicals@gmail.com		PH: 0484- CIN: MAIL;	
	(i) Number of health care facilities covered by CBMWTF	:	wastes in Kg per annum  1054			
	(ii) No. of Beds covered by CBMWTF	•	20161			
	(iii) Installed treatment and disposal	:	16000 Kg / day			
	(iv) Quantity of bio medical waste	:	7500 Kg / day			
	Quantity of waste generated or disposed in Kg per Annum (on		Yellow Category: 977			
			Red Category: 8908.9	164131		
4			White: 294.4	The same of	SAT IN GOIGE 1101	
	monthly average basis)		Blue Category: 1821.6			
			General Solid Waste:			
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility					
	(i) Details of the on-site storage	:				
	Facility		Capacity:			
			Provision of on-site storage : (Cold storage or Quantity			
			Type of treatment equipment	No of Units	Treatedo disposed	
			Incinerators		All States	
-		193	Plasma			
	- TELUS .		Pyrolysis			
	- 3		Autoclaves			
	- I Man		Microwave		to the same of	
			Hydroclave		not a south a second of	
			Shredder			
		1				

r for the period from	
(ii) Disposal facilities	
- Post radinges	cutter or destroyer
	ucstroyer and a second a second and a second a second and
	Sharps
	Encapsulation
	or concrete
Ipangadi.	
emmad, Tirurangeth Post.	Deep burial
	pits 12 notices a leading to the second of t
	Chemical
	disinfection:
	Any other
	- 1 (1 ) (1 ) (1 ) (1 ) (1 ) (1 ) (1 ) (
(iii) Quantity of recyclable	
(iv) No. of Vehicles used for	: Red Category (like plastic, glass, etc.)
	Table of consents under 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Type of Health Cara regular
	Tel Tabal to toll Isingtof the ball to
	(ii) Non pedded hospital
SUPPLIES INCIDED TO THE CARREST	(till Us are number and its date of
-8850 H4	DEFILIDIORIZAS IN ORIVIS AJAREX
No.	AMBALAMEDU, KOCHI-681 JD3, KERA
The second secon	Completion MATE
(v) Details of incineration ash	CUTTOR INTERPOLATION OF THE PROPERTY OF THE PR
and ETP sludge generated and	where
disposed during the track	disposed
disposed during the treatment of	
wastes in Kg per annum	(i) You nher of health care facilities 1,054
	Fovered by CBMWTF
	(ii) No. of Bads covered by 20163
	STEVMBD STEVMBD
	Vib Visit printing and the control of the control o
	Ash
	The state of the s
	ETP Sludge
	Cual tity of waste generated or
(vi) Name of the Common Bio-	disprised on Xa nor Annum Lon Louise and All San
(vii) List of member HCF not	monthly average parish and usual services and an armonthly average parish
(vii) List of member HCF not	CRAW DUX (Stephen)
"Do you have bio-medical waste	Octube of the Storage, Treatment, Transportation & Storage
Details trainings conducted on	mail . The form and a mile and the selection of the selec
(i)	Unit Description of the Company of t
(ii) (iii)	Provide and the management of the state of t
(iii)	Marine Line
(iv) b	Annual An
(v)	
Details of the accident occurred	
(i)	
(ii)	
(iii)	
(iv)	
(iv) Are you meeting the standards of	
(iv) Are you meeting the standards of Details of Continuous online	
(iv) Are you meeting the standards of	

Any other relevant information

(Air Pollution Control Devices attached with the Incinerator)

ertified that the above report is for the period from 01-01-2023 to 31-12-2023

Date:

04-12-2024

Place:

Tirurangadi

Name and Signature of the Head of the Institution

