

Form - IV (See rule 13) Bio Medical Waste Annual Return for the Calender Year - 2023 **Application Type: HCF Calender Year** Submit To 2023 SRO-Mumbai IV **Member of CBMWTF:** Yes Type of Health Care Facility Bedded 1) Particulars ii) Middle Name i) First Name iii) Last Name Dr Santosh Suryabhan Shinde iv) Designation v) Aadhaar No vi) PAN No COO 527734223534 BCQPS9962 viii) Tel. No. ix) Fax No. vii) Address as per Aadhaar Card FLAT G/601, RADHIKA PARK WADGAON 9821954477 SHERI, PUNE x) e-mail xi) URL of website santosh.shinde@hcgel.com www.hcgoncology.com 2) Details of Health Care Facility i) Name of the HCF ii) Email iii) Name of the contact person HCG APEX CANCER CENTRE DRRAJESH.C@HCGEL.COM dr rajesh chaskar iv) Contact No. 9821954477 3) Address of the Health Care Facility i) Building Name/Building No./Survey ii) Street / Village iii) City / Taluka CROSS ROAD IC COLONY MUMBAI Number HCG APEX CANCER CENTRE iv) District v) Pin-Code Number vi) Near by Landmark 400092 Mumbai city vii) Latitude coordinate viii) Longitude coordinate ix) Ownership 19.22 Private 4) Details of valid Combined Consent and BMW Authorization (CCA) i) CCA / Authorization No. ii) Valid Upto Apr 21 2024 12:00:00:AM 0000099055/CR/2108000577 5) Total No of Beds (As per valid Authorization) 119 887722496 6) Registration Number (e.g. Bombay Nursing Home reg. no., MSDC, MBTC) Mar 31 2027 12:00:00:AM 7) Registration Expiry Date 8) Faculty of Medicine 9) Details of membership of common bio-medical waste treatment facility (CBMWTF) Yes Name of CBMWTF M/s. SMS Envoclean Pvt. Ltd, Mumbai Membership Number 40005615

119

31-12-2024

Number of beds

Validity of Membership

10) Details of BMW) Authorized Bio Medical Was	te Quantity Kg/month (as per	valid CCA)	
Yellow 555.00000	Red 155.00000	Blue 25.00000	White 60.00000
i) Bio Medical Waste Generat	ed (Kg/Month)		
Yellow 734.00000	Red 808.00000	Blue 4.00000	White 288.00000
ii) Quantity of Biomedical was	ste given to CBMWTDF (kg/Mo	nth)	
Yellow 734.0000	Red 808.0000	Blue 4.0000	White 288.0000
10.(a) General Solid Waste (kṣ	g/Month) 500.0000		
11) Details trainings conducte) Number of trainings conduc 24			
ii) Number of personnel traine	ed		
iii) Number of personnel train	ed at the time of induction		
iv) number of personnel not u 1	ndergone any training so far		
v) whether standard manual f Yes	or training is available?		
vi) any other information nil			
12) Details of the accident occ) Number of Accidents occurr			
ii) Number of the persons affe	ected		
iii) Remedial Action taken (Ple No	ease attach details if any)		
iv) Any Fatality occurred, If ye No	es details.		
13) Details of Liquid waste ge	nerated and treatment metho	ds (STP and ETP)	
i) STP	Yes	Capacity 80	(CMD)
ii) ETP	No	Capacity	(CMD)
14) Is the disinfection method standards in a year? No	l or sterilization meeting the l	og 4 standards? How many	times you have not met
15) Whether HCE intended to No	Sale / Handover liquid BMW fo	or R&D purpose	
Place	Designation	Date 18-04-20	