Bio-medical Waste Management MONTHLY REPORT

Date: | 2 | 2 | 4

- 1) Particulars of the applicant
- (i) Name of the authorized person (occupier/operator) Mr. Rakesh Gaikwad
- (i) Name & address of the Institution National Institute of ophthalmology,

(376, Sind Soc, Bremen Square Aundh Pune -411007)

2) Category of waste (as per Schedule-I of the Rule) generated and quantity on a monthly average basis.

Category	Waste Quantity	Kg
YELLOW	34	
RED	24	89.356 kg
WHITE	01	2.440 Kg
BLUE	03	12.305 kg
	62	[191.04 kg

Certified that the above report is for the period from - 1/1/24 to 31/1/24

Signature :

Designation : Medical Director