## Bio-medical Waste Management

Date: 4 |03|2024

- 1) Particulars of the applicant
- (i) Name of the authorized person (occupier/operator) Mr. Sandeep Sagvekar
- (i) Name & address of the institution: National Institute Of Ophthalmology,

1187/30 Off Ghole Road, Shivajinagar Pune-411005

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

| Yellow | === qqantity | Ka,      |
|--------|--------------|----------|
| Red    | 72           | 5187.490 |
|        | 47           | 173.3051 |
| White  | 0            |          |
| Blue   | 6            | 12.6657  |
|        | 10           | 20.8801  |
| Total  | 135          | 5,334.34 |

Certified that the above report is for the period from 1/2/24 to 29/2/24

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Signature:

Designation: Medical Director

