

Unique Registration No.: BHHP0113



Registration Certificate



Outward No.: SHD/23-24/001676

Date: 05-Feb-2024

This is to certify that **SMT.SHALINITAI MEGHE AYURVED HOSPITAL, BHILEWADA BHANDARA , AT.POST BHILEWADA BHANDARA -441904** is registered with SUPERB HYGIENIC DISPOSALS, NAGPUR for Management of Bio Medical Waste in accordance with, the provision of Bio Medical Waste Management Rules, 2016, as amended and in compliance with the provisions of CPCB guidelines.

1. Authorized Person of HCE (Name and Designation)	DR.ATUL TELRANDHE
2. Bombay Nursing Home Act Registration Details	
a. BNH Registration Number	ZPB/D-20/BNHR/5328/21
b. BNH Issue Date	20-Mar-2021
c. Total Number of Beds	100
d. BNH Validity(Form 'C')	31-Mar-2024
3. Common Treatment Facility Registration Details	
a. Date of Registration	14-Apr-2022
b. No. of Beds Registered	60
c. Registration Validity	31-Dec-2024
4. Renewal of CTF Membership(if applicable)	
a. Renewal Date	31-Dec-2024
b. No. of Beds Registered	60
5. MPCB Consent (Establish/ 1 st Operate/Renewal) Details	
a. Consent/ CCA Number	
b. Issue Date	
d. Validity up to	



For SUPERB HYGIENIC DISPOSALS

Note : HCE shall display copy of Registration Certificate at front Desk and Temporary BMW storage area.



Application for Consent/ Authorisation

Sir,
I/We hereby apply for*

1. Consent to Establish/Operate/Renewal of consent under section 25 and 26 of the Water (Prevention & Control of Pollution) Act, 1974 as amended.
2. Consent to Establish/Operate/Renewal of consent under Section 21 of the Air (Prevention and Control of Pollution) Act, 1981, as amended.
3. Authorization/renewal of authorization under Bio-Medical Wastes Management Rules, 2016 as amended, Hazardous waste (M,& TM)n Rules, 2016, in connection with my/our/existing/proposed activity from the premises as per the details given below.

1.General Information

UAN No: MPCB-CONSENT-0000192098 **Application submitted on:** 28-12-2023

Industry Information

Industry Type: O88 Health-care Establishment (as defined in BMW Rules) **Category:** Orange **Scale:** S.S.I

Consent To: Operate (1st Operate) **Submit to:** SRO - Bhandara

Consent to Establish Details

Consent to Establish No.	Consent to Establish Grant date	Consent to Establish Valid Upto
	01-01-1970	01-01-1970
Authorization No.	Authorization Grant date	Authorization Valid upto
FRESH APPLICATION	28-12-2023	28-12-2023

Perticulars of Applicant (Owner/Occupier/Any other Authorised Person)

First Name	Father / Husband Name	Last Name	Designation
Mr. KIRAN	KRISHNARAO	PANDAV	Secretary
Mobile No	Telephone/Fax	Email	Aadhar No
9970791159		shrmy@rediffmail.com	975128797701
PAN No	Address	Pin Code	
AAATS3663D	103Sanchyani Apartment Dhantoli Nagpur 440012	440012	

2. Health Care Facility (HCF) Information

a) Name of the Health Care Facility

SMT . SHALINITAI MEGHE
AYURVEDIC MEDICAL COLLEGE
HOSPITAL & RESEARCH CENTER

b) Address for Correspondance

Pin Code	District	City/Town
441904	Bhandara	Bhandara
Survey/Gut No.	Name of premises /Building	Road/Street
The Secretary Sanmarg Shikshan Sanstha	At Village Bhilewada Post Kardha	Sanmarga Shikshan Sanstha
Area/Locality	Email	Website URL
Bhandara	shrmy@rediffmail.com	NA

c) Details of Contact Person

Name of the contact person	Contact No.	Email	Designation
Sanjay Tumane	9970791159	shrmy@rediffmail.com	Director

d) Onwership of Facility

Private (Registered under company Act)

e) Month and year of commissioning of the HCF

20/03/2021

f) Area of the Facility / Hospital

i) Total plot area (in square meter)	ii) Built up area (in square meter)	iii) Open Plot Area (Sq.Mtr)
23500	7491	21620.00

g) Enter Latitude and Longitude of site (In degrees)

Latitude (In degrees)	Longitude (In degrees)
21.1386	79.69

h) Gross capital investment of the HCF/CBUTF without depreciation till the date of application (Cost of building, land, plant and machinery). (To be supported by certificate from Chartered Accountant / Balance sheet)

CA Certificate

Sr. No.	Fixed Assets	Amount (in lakh)
1	Land	109.0200
2	Building / Premises	115.0500
3	Plant & Machinery / Equipment	112.1200
4	Furniture / Fixture	
5	Any other movable / immovable fixed assets (Please specify)	
5.a	NA	NA
5.b	NA	NA
5.c	NA	NA
5.d	NA	NA
5.e	NA	NA
6	Capital Work in Progress (if any)	NA

Gross Capital (in Lakh)

336.19 (Lakh)

Certificate Date

04-05-2023

i) Compliance of Location Criteria

Location of facility	Whether it is notified industrial area	Land Use Type	Land Ownership
Rural	No	Other (AYURVEDIC COLLEGE AND MULTISPECIALITY HOSPITAL)	Self Owned

j) Does HCF have Laundry facility in premises

No

k) Does HCF have Canteen/Cafeteria facility in premises

No

l) Does HCF have Hostel/Residential quarters in premises

No

m) Number of Patient Treated per Day

OPD (Average Patient / Day) IPD / Admitted (Average Patient / Day)

100 20

n) Name of the local body under whose jurisdiction the HCF is located.

ULB Type

Grampanchayat

ULB Name

o) Details of the planning permission obtained from the local body/Town and Country Planning authority/Metropolitan Development authority/ designated Authority

Planning Authority

Grampanchayat

Planning permission

Occupancy Certificate

3. BMW Authorization Details

a) Discipline of Medicine

Medicine

b) Bombay Nursing Home Registration Details

Total number of Beds	BNH Registration Number	Valid Upto	First Issued Date
100	32	31-03-2023	20-03-2021

Certificate issuing Authority

District Health Officer

Total Bed Break up

General Beds	ICCU/ICU Beds	Maternity Beds	Operation Theatre	Oncology Beds	Other Beds
70	10	15	5		

c) Diagnostic and Pharma Facilities available in Premises

Pathology Lab	Yes	Average Samples/day	25
Blood Bank	No		
X-Ray	Yes	X-Ray Number Per Day	15
CT Scan	No	CT Scan Number Per Day	
MRI	No	MRI Number Per Day	
USG	No		
ECG/EEG	Yes	ECG Number Per Day	20
Medical Store / Pharmacy	No		
Other	No		

d) Whether HCE intended to Sale / Handover liquid BMW for R&D purpose

No

Category wise Bio-Medical Waste Collected ,Treated,Disposed			
Sr. No	Category	Type of Waste	Quantity not to exceed (Kg/M)
1	Yellow	a) Human Anatomical waste	10.00
		b) Animal Anatomical Waste	0
		c) Soiled Waste	20.00
		d) Expired or Discarded Medicines	1.00
		e) Chemical Waste	0
		f) Chemical Liquid Waste	0
		g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.	5.00
		h) Microbiology Biotechnology and other clinical laboratory waste	2.00
2	Red	Contaminated waste (Recyclable)	20.00
3	White (Translucent)	Waste sharps including Metals	5.00
4	Blue	a. Glassware	10.00
		b. Metallic body implants	5.00

Details of Storage at Facility						
Sr No	Type	Category	Temporary Storage Area			Avg. No.of Bag/Container (Per Day)
			Length (Ft)	Width (Ft)	Height (Ft)	
1	Untreated BMW	Yellow	4.00	4.00	8.00	1.00
		Red	2.00	2.00	8.00	1.00
		Blue	2.00	2.00	8.00	1.00
		White	2.00	2.00	8.00	1.00

Do you Have Equipment Installed for Pretreatment of Yellow (g), (h) Category Waste

No

Whether you have establish a Bar-Code system for Bag or Containers containing Bio-Medical waste

No

Common Facility Membership Details (CTF)

CTF Name

M/s. M/s. Superb Hygiene Disposals, Nagpur

Membership Number

BHHP0113

Issued Date

31-12-2023

Do you have Captive Treatment

No

4.Consent Details

a) Sources of Water

i) Surface Water

No

ii) Ground Water

Yes

Number of Borewell

Number of Openwell

Qty of Water Extracted (CMD)

1 20

Do you Have CGWA NOC No

iii) Tanker Water No

b) Water Consumption Details

Raw Water (CMD) Recycle Water (CMD) Total Water Quantity Requirement (CMD)
 18 2 20

c) Water consumption for different uses (CMD)

Purpose	Consumption	Effluent Generation	Treatment	Disposal
Domestic Pourpose	18	1	STP	Local Bodies Sewer
Processing whereby water gets Polluted & Pollutants are Biodegradable	2	2	ETP	Local Bodies Sewer
Processing whereby Water gets Polluted, Pollutants are not Biodegradable & Toxic	0	0	NA	Local Bodies Sewer
Industrial Cooling, spraying in mine pits or boiler feed	0	0	NA	Local Bodies Sewer
Total	20.00	3.00		

d) Waste Waster Treatment

Have you installed STP or ETP

No

e) Other waste generation details

1) Municipal Solid Waste

a) Biodegradable Waste(kg/day) b) Recyclable Waste(kg/day) c) Domestic Hazardous Waste(kg/day)
 0 0 0

2) E-Waste (Kg/Annum) 0

3) Plastic Waste (Kg/Annum) 0

4) Hazardous Waste (Kg/Annum) 0

Effluent Analysis result (As per latest report)				
Parameter	Permissible Limiting concentration	Latest 3 Sampling Dates		
		1st Date	2nd Date	3rd Date
		28-12-2023	28-12-2023	28-12-2023
pH	6.5 - 9.0	0	0	0
Oil and Grease (mg/l)	10	0	0	0
BOD (mg/l)	30	0	0	0
COD (mg/l)	250	0	0	0
TSS (mg/l)	100	0	0	0
Bio-Assay Test	90 % survival of fish after 96 hours in 100 % effluent	0	0	0

Air Pollution

Whether D.G. Set Installed

No

Capacity(KVA)	Make	Fuel Used	Fuel QTY	Unit	Stack Height in meter	Accoustic Enclosure for noise control
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Do you have Boiler Installed

No

Boiler Details					
Make	Model	Combustion efficiency	Fuel Type	Qty	Shape (round/rectangular)

Do you have adequate facility for collection of samples of emissions in the form of port holes, platform, ladder\etc. As per Central Board Publication "Emission regulations Part-III" (December, 1985)

Port hole

No

Platform

No

Ladder

No

Parameter	Permissible Limiting concentration	Latest 3 Sampling Dates		
		1st Date	2nd Date	3rd Date
		NA	NA	NA
Particulate matter	50 mg/Nm ³	0	0	0
Nitrogen oxides	400 mg/Nm ³	0	0	0
HCL	50 mg/Nm ³	0	0	0
Total Dioxins and Furans	0.1 ng TEQ/Nm ³ (at 11% O ₂)	0	0	0
Hg and its compounds	0.05 mg/Nm ³	0	0	0

Whether you have provided Online Continuous Emission Monitoring Systems (OCEMS)

No

Quantity of ash generated from Boiler (Tonnes/ month):**Mode of Disposal of Boiler ash****Provision Of Alternate Electric Supply**

No

Separate Electricity Meter Provided to Pollution control Devices

No

Hazardous Waste**CHWSDF Details****CHWTDF Facility Name**

NA

CHWTDF Membership Number

0

Hazardous Waste Details		
Description	Waste Category	Quantity in MT/Month
Incineration Ash	37.3	0
STP/ETP	35.3	0
Used Oil		0

Non-Hazardous Waste aspect

Description	Quantity	UOM	Treatment	Treatment	Remarks
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Legal Section

Legal Action Type	Legal Action Ref No	Legal Action Date	Legal Action Details	Remarks
NA	NA	01-01-1970	NA	NA

5. Additional Information

Do you have Bio Medical Waste Management Committee Constituted

No

Average Cost (O & M) for ETP/STP

15000

Average Cost of APCD Rs/Year

15000.00

Brief details of tree plantation/green belt development within applicant's premises

Open Space Availability

1000

Plantation Done On

500

Number of Trees Planted

50

Whether Environmental Statement submitted

No

Environmental Statement submitted Date

01-01-1970

Any other additional information that the applicants desires to give

Do you have Infection Control Committee Constituted

No

6. Financial Details

Is there any Bank Gurantee impose on you during previous Consent/Authorization period.

No

Bank Gurantee Number	Date	Valid Up To	Amount	Bank Name	Branch
0	01-01-1970	NA	0	NA	NA

Additional Bank Gurantee Details, if Any					
Bank Gurantee Number	Date	Valid Up To	Amount	Bank Name	Branch
0	01-01-1970	NA	0	NA	NA