

HOSWIN Incinerator Pvt. Ltd.

363-A, Mahalaxmi Nagar,
Main Road, Indore (M.P)
Ph. : 0731-4065172, 2539367, 975564433, 66
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AGREEMENT

THIS AGREEMENT (hereinafter referred to as the agreement "the agreement") executed on this date 1/10/2020 between..the..institution..name..M/S Reliable Diagnostic - Centre

Owner Mrs. Anjali Sharma Address C 14/2, Talwandi Nursery Road,
Kota (hereinafter referred to as 'the member') and

M/S **HOSWIN INCINERATOR PVT. LTD.** a company having registered office at 363-A, Mahalaxmi Nagar, Main Road, Indore and branch office at Dhanwada, Khanpur Road, Jhalawar (Here in after referred to as "the company").

(The expression "the member" and "the company" wherever they occur in this presents shall unless the context otherwise admits, also mean and include their respective executors, administrators, legal representatives and assigns.)

The company has set up a centralised Solid biomedical waste treatment facility at Dhanwada, Khanpur Road, Jhalawar, Rajasthan. Wherein the members shall be benefited by getting their solid biomedical waste disposed off properly and it is expedient to have a written instrument of agreement defining principal terms and conditions of the project. Whereas:

A. The Govt. of India, Ministry of Environment and Forests formulated and notified the Bio-Medical waste (Management & Handling) Rules 2016, and thru it, made it mandatory for the Bio-Medical waste generating entities, which includes Nursing Homes, Hospitals, Maternity Homes, Pathology labs, Blood banks, Clinics, Dispensaries etc, to manage, handle, transport, treat & dispose the waste in accordance with the provisions of the **Bio-Medical waste (Management & Handling) Rules 2016**, through a common treatment facility.

B. The Directorate of Urban Administration and Development Jaipur (Rajasthan) invited proposals from experienced private parties on PPP Mode and Build Own and Operate [BOO] basis for providing a Common Biomedical Waste collection, reception, storage, transport treatment and disposal facility for Jhalawar and Baran region. Our company was awarded the work and thereafter the company established a Centralised Biomedical Waste Treatment Facility at Jhalawar which is operational since the year 2009.



In context of the implementation of the orders from Directorate Local Bodies, the letter from Nagar Nigam, Kota is being issued vide letter S.No.:-NNK/2019/4571 dated, 9/7/2019 and letter S.No.:- NNK/2019/1187-98 dated, 05/08/2019.

NOW, THEREFORE, in consideration of the premises and the mutual covenants, promises, assurances, representations and provisions set forth hereinafter, the Parties hereto agree as follows:

1. That 'the member' means private / Govt. hospitals, nursing homes, Pathology labs, blood banks, private medical practitioners and all other solid bio-medical waste generating institutions.
2. That the company would develop a "Centralised bio-medical waste treatment facility" and install required equipment for proper disposal of Solid bio-medical waste after receiving the relevant permissions and authorisations from various departments.
3. That the transportation of the solid bio-medical waste shall be part of the responsibility of the company. The company will transport only the segregated Solid Bio-Medical waste from the doorsteps of the hospital to the treatment site. The company will make its own arrangements for the transportation of the waste. The waste collection will be done on regular basis however, one day off will be kept every week for regular maintenance of vehicles and equipments.
4. That the member will have to keep their segregated solid Bio-Medical waste properly packed and tagged as per guidelines of Bio-Medical waste Rules, 2016 & keep it ready at their door steps on scheduled time for transportation. The company will not collect the waste if:
 - a) it is kept open,
 - b) it is not segregated
 - c) it is not packed, or
 - d) it is mixed with municipal solid waste or liquid waste.
5. That the member will arrange what so ever, non-chlorinated bags, containers of different colour code, labels, tags etc. required for proper segregating, packing and labelling of their solid bio-medical waste as laid down in Bio-Medical waste Rules of 2016.
6. That the member will not be responsible for any civil or court liability arising out of transportation, accident or any other event during the disposal of solid biomedical waste. Pre-transport hazards & risk thereto if any, shall be on the part of the member & company shall not be liable thereto.
7. This project is for treatment of solid bio-medical waste only. Other type of wastes (such as liquid waste and municipal waste) shall be treated or disposed off by the members at their own arrangements. The company will not be responsible for any liabilities other than treatment of solid bio-medical waste.



8. That the quantities of solid biomedical waste to be received by company from the member should not exceed more than 350 grams per bed per day. If the quantity of waste exceeds this limit then additional charge would be levied.
9. That the member has to take authorisation for bio-medical waste / any other authorisations and consents from various departments for their institution by themselves. The responsibility of the company will be limited to issuing an yearly certificate to the member of the Common Facility who get their solid bio-medical waste treated through the company confirming that their waste has been properly treated & disposed off, so that member may submit it to the concerned departments.
10. That the company will charge the member i.e. "solid bio-medical waste generating institution" on the total bed capacity. In case it is found that the hospital is operating with extra bed strength from what is given in the agreement, the company would charge for the extra bed strength for preceding 90 days from the date of information and may stop providing services to such institutions in the event the increased dues are not paid in 30 days. Any increment in the bed capacity is to be intimated to the company in advance.
11. The member expressly agrees and acknowledges that this Common Bio-Medical treatment and disposal facility is being set up for their collective use, therefore during the initial term of this agreement, the member agrees that the Waste generated at their institution will only be treated and disposed off at this Common Facility in accordance with the terms of this agreement and that any other facility for this purpose would not be patronised.
12. That the charges will be as under:
- | | |
|--|---------------------------------|
| • Hospitals | :Rs.4.00 per bed per day |
| • Pathology Labs., Diagnostic Centre, Blood-Bank, Dental Clinics, OPD Clinics, Dispensary | :Rs. 3200 per month |
| • Veterinary Hospitals, Poly Clinics, Labs | :Rs. 6000 per month |
| • Drug WareHouse-Expiry Medicines | :Rs. 6000 per month |
13. That billing for hospitals and nursing homes will be for minimum 10 beds.
14. That the company shall raise the bills directly to the member on the pre-decided rates as mentioned in this agreement. Bills are to be paid by the member through cheque /demand draft/online to the company.
15. **Company shall not be responsible for any payment made in cash.**
16. That the company shall dispatch to the member their part of bill on or before 5th of the every month. The due date for payment by the member shall be 15th day of the month. Failure to pay bill by due date shall attract 10% surcharge every month or part there to.
17. That the member shall bear the expenses for implementation of Bio-Medical waste (Management & Handling) Rules, 2016 rules and any amendments made in there of in the course of time.



18. That the company may at its sole discretion suspend the collection of waste from the defaulting member, who has failed to pay their dues for continuous two months after duly informing them 15 days in advance. That the defaulting member may be asked to pay a joining fees equal to one months of their monthly average bill.

19. That the new member joining the facility will be charged on the prevailing rates at the time of joining the facility.

20. That the company will issue yearly certificate to the members of the project who get their solid bio-medical waste treated through the company (confirming that their waste is being properly treated & disposed off, so that members may submit it to the concerned departments). Certificate will be issued only after clearing all dues.

21. That for complaint of any default or an unsolved grievance, the member or the company may approach to the monitoring committee. In case the dispute is not resolved by the standing committee the matter will be solved as per the provisions of The Arbitration and Conciliation Act 1996.

IN WITNESS WHEREOF the parties hereto have set and subscribed their respective hands and seals on the day, month and year first above written.

Place: Kota

For and on behalf of the Member

Date: 1/10/2020

For Hoswin Incinerator Pvt. Ltd.


[Authorised Signatory]

[Authorised Signatory]

Common witness

1. Aarzu Gupta
R

2. Ravi Shrivastava



Regional Office Kota
Rajasthan State Pollution Control Board
 SPL-2A, Road no. 6, Indrapasth Ind. Area, Kota
 Phone: 0744-2490873



Registered

File No : F(BMW)/Kota(Ladpura)/6472(1)/2020-2021/770-771

Order No: 2020-2021/Kota/7361

Date: 29/10/2020

Unit Id : 107896

M/s Reliable Diagnostic Centre

C 14/2, Talwandi Nursery Road, Kota , Kota

Sub: **Consent to Operate** under section 25/26 of the Water (Prevention & Control of Pollution) Act, 1974.

Ref: Your application for Consent to Operate dated 20/10/2020 and subsequent correspondence.

Sir,

Consent to Operate under the provisions of section 25/26 of the Water (Prevention & Control of Pollution) Act, 1974 (hereinafter to be referred as the Water Act) as amended to date and rules & the orders issued thereunder is **hereby granted** for your **Reliable Diagnostic Centre plant** situated at **C 14/2, Talwandi Nursery Road, Kota Kota Tehsil:Ladpura District:Kota**, Rajasthan, subject to the following conditions:-

1 That this Consent to Operate is valid for a period from 20/10/2020 to 30/09/2025.

2 That this Consent is granted for manufacturing / producing following products / by products or carrying out the following activities or operation/processes or providing following services with capacities given below.

Particular	Type	Quantity with Unit
Pathological Laboratory	Service	0.00 BEDS

3 That this consent to operate is for existing plant, process & capacity and separate consent to establish/operate is required to be taken for any addition / modification / alteration in process or change in capacity or change in fuel.



Regional Office Kota
Rajasthan State Pollution Control Board
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- 4 A. That, segregation of liquid chemical waste at source and pre-treatment or neutralization shall be ensured prior to mixing with other effluent generated from health care facilities.
- B. That, treatment and disposal of liquid waste shall be strictly in accordance with provisions of Bio Medical Waste Management Rules, 2016 (BMWR-2016) and amended upto date.
- C. That the grant of consent/authorization shall not absolve the project proponent from making compliance of other statutory obligations prescribed under any other law or directions of courts or any other instrument for the time being in force.
- D. That the unit shall not establish any plant / process or does not carry out any activity which attracts environmental clearance under provisions of the Environmental Clearance notification Sep. 2006.
- E. That no ground water shall be extracted without prior permission of CGWA (Central Ground Water Authority).
- F. That the HCF shall comply the provision of the Bio Medical Waste Management Rules, 2016 (BMWR-2016) and amended upto date.
- G. That HCF shall submit the details of ozone depleting substances utilized, within one month if issuance of this letter.
- H. That if anything found concealed in the content of the authorization/consent application(s) and enclosures the authorization shall be deemed to have been revoked with immediate effect.
- I. That this consent/authorization is being granted without site verification of the Health Care facility on the basis of information, affidavit and MOU/certificate (from common bio medical waste disposal facility service provider) submitted by you and if on verification any violation is observed the authorization shall be revoked/refused and legal action shall be initiated without any further notice.
- J. That this consent has been issued from the environmental angle only and ensuring compliances of any other law/act/rule/regulation or order of any Court/Tribunal is the sole responsibility of the project proponent and the concerned departments.
- 5 That the total water consumption of the unit shall not exceed 1.0 KLD.
- 6 That the wastewater generated from the unit shall be disposed through septic tank.
- 7 That, notwithstanding anything provided hereinabove, the State Board shall have power and reserves its right, as contained under section 27(2) of the Water Act to review anyone or all the conditions imposed here in above and to make such variation as it deemed fit for the purpose of Water Act.



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- 8 That the grant of this **Consent to Operate** is issued from the environmental angle only, and does not absolve the project proponent from the other statutory obligations prescribed under any other law or any other instrument in force. The sole and complete responsibility to comply with the conditions laid down in all other laws for the time-being in force, rests with the industry/ unit/ project proponent.
- 9 That the grant of this **Consent to Operate** shall not, in any way, adversely affect or jeopardize the legal proceeding, if any, instituted in the past or that could be instituted against you by the State Board for violation of the provisions of the Act or the Rules made thereunder.

This **Consent to Operate** shall also be subject, besides the aforesaid specific conditions, to the general conditions given in the enclosed Annexure. The project proponent will comply with the provisions of the **Water Act** and to such other conditions as may, from time to time , be specified, by the State Board under the provisions of the aforesaid Act(s). Please note that, non compliance of any of the above stated conditions would tantamount to revocation of **Consent to Operate** and project proponent / occupier shall be liable for legal action under the relevant provisions of the said Act(s).

Yours Sincerely

Regional Officer[Kota]

(A): Copy To:-

1 Master File.

Regional Officer[Kota]



Regional Office Kota
Rajasthan State Pollution Control Board
SPL-2A, Road no. 6, Indrapasth Ind. Area, Kota

Phone: 0744-2490873



Registered

File No : F(BMW)/Kota(Ladpura)/6472(1)/2020-2021/768-769

Order No : 2020-2021/Kota/7360

Unit Id : 107896

Dispatch Date: 29/10/2020

M/s Reliable Diagnostic Centre

C 14/2, Talwandi Nursery Road, Kota, Kota

Sub: Consent to Establish under section 25/26 of the Water (Prevention & Control of Pollution) Act, 1974.

Ref: Your application(s) for Consent to Establish dated 20/10/2020 and subsequent correspondence.

Sir,

Consent to Establish under the provisions of section 25/26 of the Water (Prevention & Control of Pollution) Act, 1974 (hereinafter to be referred as the Water Act) as amended to date and rules & the orders issued thereunder, is hereby granted for your **Reliable Diagnostic Centre plant** situated / proposed at **C 14/2, Talwandi Nursery Road, Kota Kota Tehsil:Ladpura District:Kota**, Rajasthan under the provisions of the said Act(s). This consent is granted on the basis of examination of the information furnished by you in consent application(s) and the documents submitted therewith, subject to the following conditions:-

- 1 That this Consent to Establish is valid for a period from 20/10/2020 to 30/09/2025 or date of Commencement of production / commissioning of the project or activities whichever is earlier.
- 2 That this Consent is granted for manufacturing / producing following products / by products or carrying out the following activities or operation/processes or providing following services with capacities given below.

Particular	Type	Quantity / Capacity
Pathological Laboratory	Service	0.00 BEDS

- 3 That in case of any increase in capacity or addition / modification / alteration or change in product mix or process or raw material or fuel the project proponent is required to obtain fresh consent to establish.
- 4 That the control equipment as proposed by the applicant shall be installed before trial operation is started for which prior consent to operate under the provision of the Water Act shall be obtained. This consent to establish shall not be treated as consent to operate.



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File No : F(BMW)/Kota(Ladpura)/6472(1)/2020-2021/768-769

Order No : 2020-2021/Kota/7360

Dispatch Date: 29/10/2020

Unit Id : 107896

- 5 A. That, segregation of liquid chemical waste at source and pre-treatment o neutralization shall be ensured prior to mixing with other effluent generated from health care facilities.
- B. That, treatment and disposal of liquid waste shall be strictly in accordance with provisions of Bio Medical Waste Management Rules, 2016 (BMWR-2016) and amended upto date.
- C. That the grant of consent/authorization shall not absolve the project proponent from making compliance of other statutory obligations prescribed under any other law or directions of courts or any other instrument for the time being in force.
- D. That the unit shall not establish any plant / process or does not carry out any activity which attracts environmental clearance under provisions of the Environmental Clearance notification Sep. 2006.
- E. That no ground water shall be extracted without prior permission of CGWA (Central Ground Water Authority).
- F. That the HCF shall comply the provision of the Bio Medical Waste Management Rules, 2016 (BMWR-2016) and amended upto date.
- G. That HCF shall submit the details of ozone depleting substances utilized, within one month if issuance of this letter.
- H. That if anything found concealed in the content of the authorization/consent application(s) and enclosures the authorization shall be deemed to have been revoked with immediate effect.
- I. That this consent/authorization is being granted without site verification of the Health Care facility on the basis of information, affidavit and MOU/certificate (from common bio medical waste disposal facility service provider) submitted by you and if on verification any violation is observed the authorization shall be revoked/refused and legal action shall be initiated without any further notice.
- J. That this consent has been issued from the environmental angle only and ensuring compliances of any other law/act/rule/regulation or order of any Court/Tribunal is the sole responsibility of the project proponent and the concerned departments.
- 6 That the total water consumption of the unit shall not exceed 1.0 KLD.
- 7 That the wastewater generated from the unit shall be disposed through septic tank.
- 8 That, notwithstanding anything provided hereinabove, the State Board shall have power and reserves its right, as contained section 27(2) of the Water Act to review anyone or all the conditions imposed here in above and to make such variation as it deemed fit for the purpose of compliance of the Water Act.



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- 9 That the grant of this **Consent to Establish** is issued from the environmental angle only, and does not absolve the project proponent from the other statutory obligations prescribed under any other law or any other instrument in force. The sole and complete responsibility, to comply with the conditions laid down in all other laws for the time-being in force, rests with the industry/ unit/ project proponent.
- 10 That the grant of this **Consent to Establish** shall not, in any way, adversely affect or jeopardize the legal proceedings, if any, instituted in the past or that could be instituted against you by the State Board for violation of the provisions of the Act or the Rules made thereunder.

This **Consent to Establish** shall also be subject, beside the aforesaid specific conditions, to the general conditions given in the enclosed Annexure. The project proponent will comply with the provisions of the **Water Act** and to such other conditions as may, from time to time, be specified by the State Board under the provisions of the aforesaid Act(s). Please note that, non compliance of any of the above stated conditions would tantamount to revocation of **Consent to Establish** and project proponent / occupier shall be liable for legal action under the the relevant provisions of the said Act(s).

Yours Sincerely

Regional Officer[Kota]

(A): Copy To:-

1 Master File.

Regional Officer[Kota]

RAJASTHAN STATE POLLUTION CONTROL BOARD

SPL-2A, Road no. 6, Indrapasth Ind. Area, Kota

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F(BMW)/Kota(Ladpura)/6471(1)/2020-2021/772-773

Date: 29/10/2020

Unit Id : 99880

FORM IV
(SEE Rule 10 of BMW Rules, 2016)

(Authorization for operating a facility for Collection, Generation, Storage, Transport of Biomedical Wastes)

- 1 Authorization Letter No. BMW/2020-2021/Kota/BMW/103.
- 2 Dr Deepak Khandelwal, PROP of Anjaneya Ortho & Gynaec Care is hereby granted an authorization under Rule 10 of Bio-Medical Waste (Management & Handling) Rules, 2016 (BMW Rules,2016) to operate a facility for Collection, Generation, Storage, Transport of biomedical waste on the premisses situated at 4-W-2 TALWANDI KOTA, TALWANDI, Tehsil Ladpura, District Kota.
- 3 This authorization is valid till it is cancelled /revoked by the Competent Authority.
- 4 This authorization is valid for operation of the Hospital with 10 0 number of beds.
- 5 This authorization is subject to the conditions contained in enclosed annexure and to such other conditions/guidlines as may be specified under BMW Rules, 2016 by Central Pollution Control Board, Delhi or Ministry of Environment & Forests(MoEF), Government of India (GOI) or Department of Environment (DOE), Government of Rajasthan (GOR).
- 6 Segregation, packing, transportation, storage, treatment & disposal of bio medical waste shall be in accordance with Rule 7 & 8 of BMW Rules, 2016. The bio medical waste shall be disposed of at Common Biomedical Waste Treatment & Disposal Facility (CBMWTF) established for the area viz .
- 7 The mercury bearing waste arising due to breakage of thermometers,pressure gauges and other instruments is not to be treated as bio-medical waste or other solid waste.The mercury bearing waste is to be segregated, collected , stored and disposed in accordance with the provisions of Hazardous Waste and other wastes (Management and Transboundary Movement) Rules, 2016.
- 8 The Annual report in accordance with Rule 13 for the period 1st January to 31st December of previous year shall be submitted On or before 30th June of every year in form - IV as prescribed in the Rules and the annual report shall also be made available on the web-site of the occupier. Further, all the health care facilities shall develop their website within two years from the date of notification of the BMW Rules,2016, in case not already developed.





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- 9 The hospital shall maintain the record of biomedical waste as per Rule 14 & shall be produced during the inspection.
- 10 That the hospital shall phase out use of chlorinated plastic bags, gloves and blood bags within two years from the date of notification of the BMW Rules, 2016.
- 11 That the hospital shall establish a Bar-Code System for bags or containers containing bio-medical waste to be sent out of the premises or place for any purpose within one year from the date of the notification of the BMW Rules, 2016.
- 12 That the hospital shall provide training to all its health care workers and others, involved in handling of bio-medical waste at the time of induction and thereafter at least once every year and the details of training programs conducted, number of personnel trained and number of personnel not undergone any training shall be provided in the Annual Report.
- 13 In case of expansion in bed capacity or increase in pollution load, the hospital shall obtain prior Consent to Establish under Water (Prevention and Control of Pollution) Act, 1974, A (Prevention and Control of Pollution) Act, 1981 & revised Authorization under BMW Rules, 2016.
- 14 That the hospital shall comply the provisions of Bio-medical Waste Management Rules, 2016.
- 15 That the hospital shall comply with the standards for treatment disposal of Bio-medical Waste as specified under schedule II of Bio-medical Waste Management Rules, 2016.
- 16 That infected hospital liquid waste must be given chemical treatment by using at least 10% hypochlorite solution or any other equivalent chemical reagent to ensure required disinfection as prescribed in part-2 of schedule-I of the Rules.

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Date: 29/10/2020

- 17 A. That, membership of concerned Common Bio-medical Waste Treatment and Disposal facility shall be obtained for scientific disposal of bio medical Waste, as per provisions of the Bio Medical Waste Management Rules-2016 (BMWR-2016) and amended upto date.
- B. That, chlorinated plastic bags, gloves and blood bags shall not be use in compliance to the provisions of the BMWR-2016 and amended upto date.
- C. That, a provision shall be developed within the premises of health care facility for a safe, ventilated and secured location for storage of segregated biomedical waste in colored bags or containers in the manner as specified in Schedule I of the BMWR-2016, to ensure that there shall be no secondary handling, pilferage of recyclables or inadvertent scattering or spillage by animals and the Bio-medical waste from such place or premises shall be directly transported in the manner as prescribed in the rules to the common Bio-medical waste treatment facility or for the appropriate treatment and disposal, as the case may be, in the manner as prescribed in Schedule I of the BMWR-2016.
- D. That, all necessary steps shall be taken to ensure that Bio-medical waste is handled without any adverse effect to human health and the environment and in accordance with BMWR-2016 and amended upto date.
- E. That, the laboratory waste, microbiological waste, blood samples and blood bags shall be pretreated through disinfection or sterilization on-site in the manner as prescribed by the World Health Organization (WHO) or National AIDs Control Organization (NACO) guidelines and then sent to the common Bio-medical waste treatment facility for final disposal.
- F. That solid waste other than Bio-medical waste shall be dispose of in accordance with the provisions of respective waste management rules made under the relevant laws and amended from time to time.
- G. That, treated Bio-medical waste shall not be disposed with municipal solid waste.
- H. That, training shall be provided to all its health care workers and others, involved in handling of bio medical waste at the time of induction and thereafter at least once every year and the details of training programmes conducted, number of personnel trained and number of personnel not undergone any training shall be provided in the Annual Report.
- I. That, all health care workers and others, involved in handling of Bio-medical waste shall be immunized for protection against diseases including Hepatitis B and Tetanus that are likely to be transmitted by handling of Bio-medical waste, in the manner as prescribed in the National Immunization Policy or the guidelines of the Ministry of Health and Family Welfare issued from time to time.



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Date: 29/10/2020

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- 18 A. That, a Bar- Code System for bags or containers containing Bio-medical waste to be sent out of the premises or place for any purpose shall be established immediately.
- B. That, segregation of liquid chemical waste at source and pre-treatment or neutralization shall be ensured prior to mixing with other effluent generated from health care facilities.
- C. That, occupational safety of all its health care workers and others involved in handling of biomedical waste shall be ensured by providing appropriate and adequate personal protective equipments.
- D. That, health check up at the time of induction and at least once in a year for all its health care workers and others involved in handling of bio-medical waste shall be conducted and records of same shall be maintain.
- E. That, Bio-medical waste management register shall be maintain and updated on day to day basis the and display the monthly record on its website according to the Bio-medical waste generated in terms of category and color coding as specified in Schedule I.
- F. That, major accidents including accidents caused by fire hazards, blasts during handling of biomedical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I shall be submitted to the prescribed authority and also along with the annual report.
- G. That, annual report shall be made available on health care facility's own website.
- H. That, prescribed authority shall be immediately informed in case the operator of a facility does not collect the Bio-medical waste within the intended time or as per the agreed time.
- I. That, a system to review and monitor the activities related to Bio-medical waste management, shall be established either through an existing committee or by forming a new committee and the Committee shall meet once in every six months and the record of the minutes of the meetings of this committee shall be submitted along with the annual report to the prescribed authority and the healthcare establishments having less than thirty beds shall designate a qualified person to review and monitor the activities relating to Bio-medical waste management within that establishment and submit the annual report.
- J. That, all record for operation of incineration, hydro or autoclaving etc. shall be maintained, for a period of five years.

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Date: 29/10/2020

Unit Id : 99880

- 19 A. That the grant of consent/authorization shall not absolve the project proponent from making compliance of other statutory obligations prescribed under any other law or directions of courts or any other instrument for the time being in force.
- B. That the HCF shall dispose its Bio-medical waste through common facility (CBWTDF) authorized by NAGAR NIGAM KOTA.
- C. That the HCF shall be bound to take membership of common facility (CBWTDF) if new facility is authorized by NAGAR NIGAM KOTA in future.
- D. That the HCF shall comply the provision of BMW Rule 2016 and amended upto date.
- E. That the unit shall not establish any plant / process or does not carry out any activity which attracts environmental clearance under provisions of the Environmental Clearance notification Sep. 2006.
- F. That HCF shall submit the details of ozone depleting substances utilized, within one month of issuance of this letter.
- G. That this consent/authorization is being granted without site verification of the Health Care facility on the basis of information, affidavit and MOU/certificate (from common bio medical waste disposal facility service provider) submitted by you and if on verification any violation is observed the authorization shall be revoked/refused and legal action shall be initiated without any further notice.
- H. That if anything found concealed in the content of the authorization/consent application(s) and enclosures the authorization shall be deemed to have been revoked with immediate effect.
- 20 That the hospital shall maintain record of collection, storage and transportation of bio-medical waste to Common Bio-Medical Waste Treatment and Disposal Facility (CBWTDF) for disposal. The quarterly abstract related to the collection, storage, transportation and disposal shall be submitted to the H.O. and Regional Office in the format given below:

Sr. No.	Month & Year	Disposal of bio-medical waste as per colour code (in Kg.)				Number of collection trips by CBMWTDF
		Yellow	Red	Blue / White	Black	





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Unit Id : 99880

- 21 This Authorization is issued from the environmental angle only, and does not absolve the project proponent from the other statutory obligations prescribed under any other law or any other instrument in force. The sole and complete responsibility, to comply with the conditions laid down in all other laws for the time being in force, rests with the hospital/ project proponent.
- 22 This Authorization shall not, in any way, adversely affect or jeopardize the legal proceedings, if any, instituted in the past or that could be instituted against you by the State Board for violation of the provisions of the Act or the Rules made there under.

Enclose :- Annexure

Yours Sincerely

Regional Officer

Copy To:-

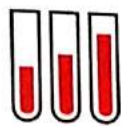
1 Master File

Regional Officer

To :

M/s Anjaneya Ortho & Gynaec Care

4-W-2 TALWANDI KOTA , TALWANDI



21.10.2020

OK

The Regional Officer,
Rajasthan State Pollution Control Board, Government of Rajasthan
2A, Road No. 6, Indraprastha Industrial Area,
KOTA (Rajasthan)

Subject: **Application for Authorisation, Consents to Establish & Operate under Water (Prevention and Control of Pollution) Act, 1974 in Red Category for Pathological Laboratory, C 14/2, Talwandi, Nursery Road, Kota (Raj.), applicant: Anjali Sharma. Unit ID 107896**

Sir,

In connection with subject application for Authorisation, Consents to Establish & Operate under Water (Prevention and Control of Pollution) Act, 1974 in Red Category for Pathological Laboratory, for your kind considerations, I submit the documents as mentioned here in below:

Details of payment of ACTO fee:

DD No.	DD Date	DD Amount	Challan No.
333331410201658	15/10/2020	5000/-	ACT- OW793379 28
Payment Mode	Transaction Dt.	Token No.	Transaction Status
RTGS / NEFT	15/10/2020	333331410201658	Success

Details of payment of ACTO fee:

DD No.	DD Date	DD Amount	Challan No.
333331410201657	15/10/2020	10000/-	ACT- OW 59315482
Payment Mode	Transaction Dt.	Token No.	Transaction Status
RTGS / NEFT	15/10/2020	333331410201657	Success

Details of payment of CTE (Water) fee:

DD No.	DD Date	DD Amount	Challan No.
333331410201653	15/10/2020	5000/-	CTE- W 201268093
Payment Mode	Transaction Dt.	Token No.	Transaction Status
RTGS / NEFT	15/10/2020	333331410201653	Success

Documents Enclosed:

01. 03 Affidavits : 1. Consent to Operate, 2. Consent to Establish, 3. BMW (Ann. 01)
02. 03 Forms : 1. Application for Authorisation, 2. Annual Report, 3. Accidental Report (Ann. 01)
03. Assessment Format for BMW Rules Compliance.
04. BMW Agreement with Hoswin Incinerator Pvt. Ltd.
05. Partnership Deed
06. Rent Agreement
07. Water Bill

Submitted please

Yours faithfully

For M/s Reliable Diagnostic Centre

Anjali
(ANJALI SHARMA) ●

Partner

C 14/2, Talwandi, Nursery Road, Kota (Raj.)



Rajasthan State Pollution Control Board

From:-

Reliable Diagnostic Centre

To,
Regional Officer
SPL-2A, Road no. 6,
Indrapasth Ind. Area, Kota

Unit ID: 107896

Application ID: 269434

Application Type: BMW

Disposing Authority: Kota

Address: C 14/2, Talwandi Nursery Road, Kota
Tehsil:Ladpura District:Kota(Unit Id :107896)

Sir,

I/We hereby apply for Authorization/renewal of Authorization under sub-rule(2) and (3) and clause (ii) of sub-rule(6) of rule 5 of the Hazardous Waste(Management and Handling) Rules, 1989 for Collection/Reception/Treatment/Transport/Storage/Disposal of Hazardous Waste

Part I: General Information

Waste Type	Bio-Medical Waste	Dealing Group	Kota
Name of Applicant	ANJALI SHARMA	Designation of Applicant	PARTNER
Application Date	18/10/2020	Received Date	20/10/2020
Application For	Fresh	Application Status	Pending
Owner Ship	Private	Type of HCF	
Authorisation Required for Treatment facilities available			
No. of Year	5	No. of Beds	0
Patients (PerMonths)	2000	Fees Amount	15000
Calculated Due Amount	5000	Total Amount With Board	15000

Waste Details

Not Applicable...

Raw Material Details

Product/ By Product/ Service/ Activity details

S. No.	Name	Quantity/ Capacity (With Unit)	Product or By Product or Service	Storage Capacity
21234	Pathological Laboratory	2000, PER MONTH	Service	2000

Water Consumption Details (Kilo liter per Day)

SrNo	Source of Water	Boiler / Cooling	Domestic	Industrial Process	Others
156536	Any Other	0	1	1	0.5

Details of Vehicle

Details of D. G. Sets

Not Applicable...

Not Applicable...

Bank Details

DD Number	DD Date	DD Amount	Challan No.	Payment mode	Token No	Transaction Date	Transaction Status
333331410201657	15/10/2020	10000.00	ACT-OW59315482	RTGS/NEFT	333331410201657	Oct 15 2020 12:00AM	SUCCESS
333331410201658	15/10/2020	5000.00	ACT-OW79337928	RTGS/NEFT	333331410201658	Oct 15 2020 12:00AM	SUCCESS

Unit ID: 107896

Application ID: 269429

Application Type: CTE WATER - Fresh

Disposing Authority: Kota

Address: No

Sir,

I/We hereby apply for obtaining

Consent, in Form XIII, under section 25/ 26 of the Water (Prevention and Control of Pollution) Act, 1974 (No. 6 of 1974) for establishing an industry/ operation/process/activity/service or any treatment and disposal system on land/ premises owned by Reliable Diagnostic Centre (Name of Director/ proprietor/ partner etc.)

Part I: General Information

A. Details of Industry/ Activity/ Service/ Operation/ Process:-

a.	Name of Industry/ Activity/ Service/ Operation/ Process	Reliable Diagnostic Centre
b.	Name and Designation of the Applicant	ANJALI SHARMA PARTNER
c.	Correspondence Address	C 14/2, Talwandi Nursery Road, Kota
	Village/ Area	Kota
	Street/ Locality/ City	Kota
	Tehsil	N/A
	District	N/A
	State	Rajasthan
	Pin Code	324005
	Telephone No. (including STD Code)	0-
	Mobile No.	7414889990
	E-Mail Address	rdckota1@gmail.com
d.	Site Address	Reliable Diagnostic Centre C 14/2, Talwandi Nursery Road, Kota
	Village/ Area	Kota
	Street/ Locality/ City	Kota
	Tehsil	Kota
	District	Ladpura
	Plot No./ Khasra No.	
	Pin Code	324005
	Telephone No. (Including STD Code)	0-
	Mobile No.	7414889990
	Fax No.	0-
e.	Email Address	rdckota1@gmail.com
	Plot Area/ Mining Lease Area	N/A
f.	Land classification	
	(a) Industrial or	No
	(b) Commercial, or	No
	(c) Agriculture, or	No
	(d) Residential, or	No
	(e) Other than above	No
g.	Whether covered under Aravalli Notification	No
h.	Whether requiring authorization under the rules dealing with Hazardous Waste notified under Environment	No

(Protection) Act, 1986 and quantity of used/ waste oil is	5 KL
Whether covered under EIA Notification, 2006	No
Gross Built up Area	0
Consent is applied for (Entire Industry/ Activity/ Service/ Operation/ Process or Part thereof- please specify)	Fresh
Category of Industry/ Activity/ Service/ Operation/ Process	Red
Scale of Industry/ Activity/ Service/ Operation/ Process	Not Available
Status of Industry/ Activity/ Service/ Operation/ Process	Operational
Total Capital Investment (without depreciation) in Industry/ Activity/ Service/ Operation/ Process (as per Project Report/ CA Certificate) for which consent is applied (Rs. in lacs)	0
Date of Commissioning	
Total number of employees (including contractual workers) in the Industry/ Activity/ Service/ Operation/ Process (maximum)	10
Total number of residents in the colony; if any within the premises of the establishment	N/A
Installed Capacity of the Industry/ Activity/ Service/ Operation/ Process	N/A
No. of working days in a year	300
No. of shifts per day	1
Electric connection number and name	NA

Process Stacks
B. Flue gases stacks
C. Fugitive emission
D. Details

B. Surrounding Details:-

S. No.	Which of the following features exist within 1 km of the site	
1.	Human Settlement (Village/ City/ Town)	
2.	Forest Sanctuary/ National Park/ Nallah/ Stream/ River/ Pond/ Dam/ any other water body	N/A
3.	Industrial area (Specify)	
4.	Any major industry (Specify)	

Part II: Information related to Industry/ Activity/ Service/ Operation/ Process

(a) Raw Material Details:
Not Applicable...

(b) Product/ By Product/ Service/Activity details

S. No.	Name	Quantity/ Capacity (With Unit)	Product or By Product or Service	Storage Capacity
21234	Pathological Laboratory	2000, PER MONTH	Service	2000

(c) Electric Energy/Water Requirement (Kilo Watt/Kilo liter per Day)
Not Applicable...

(d) Water Consumption Details (Kilo liter per Day)

SrNo	Source of Water	Boiler / Cooling	Domestic	Industrial Process	Others
156538	Any Other	0	1	1	0.5

Part III: Information related to Effluent Generation, Treatment and Disposal

(a) Effluent Generation & Disposal Details
Not Applicable...

(b) Mode Of Treatment and disposal
N/A

(c) Type of treatment system installed
N/A

Part IV: Information related to Air Pollution and Control Systems

(a) Air Emission Details

A- Process Stacks

Applicable...

B- Flue gases stacks

Applicable...

C- Fugitive emission

Applicable...

D- Details of D. G. Sets

Not Applicable...

Part V: Information related to Solid Waste:

Not Applicable...

Part VI: Information related to Consent Fee Deposition

DD Number	DD Date	DD Amount	Challan No.	Payment mode	Token No	Transaction Date	Transaction Status
333331410201653	15/10/2020	5000.00	CTE-W201268093	RTGS/NEFT	333331410201653	Oct 15 2020 12:00AM	SUCCESS

- I/ We, hereby declare that the information furnished above is correct to the best my/ our knowledge
- I/We, hereby submit that in case of change, either of the point of characteristic of discharge or the quantity of discharge or its quality, a fresh application for consent shall be made and until such consent is granted no change shall be made.
- I/We, understand the State Board and its official authorized in this behalf by the State Board can make necessary changes/ modification in the data provided by me/ us while deciding the application on the basis of the information provided by me/ us.

Date:-

Place

Signature

Name

Designation

Seal

Note:

- Consent application must be accompanied with the fees as specified in the notifications issued by the State Government time to time.
- Consent fee shall be paid through Bank Draft payable in favour of the Member Secretary, Rajasthan State Pollution Control Board or through ECS or through e-Mitra/ CSC or Bank Challan or any other facility as per orders issued by the State Board time to time.
- Documents as per check list as specified by the State Board shall be submitted along with the application.
- All documents including consent application form submitted to the State Board shall be signed/ attested by the proprietor/ authorized signatory along with seal.



कोषाधिकारी, कोटा
21 SEP 2020

RAJASTHAN

SHRI MOHAMMED
AREA KOTA
REGD. NO. 1877

AP 953184

CONSENT TO ESTABLISH

AFFIDAVIT

ANJALI SHARMA Partner (with name and designation) W/o Shri Krishna Kant...R/o C 14/2 Talwandi, Nursery Road, Kota do solemnly affirm and declare as under:-

1. That I am responsible for establishing/ operating the unit named : M/s. Reliable Diagnostic Centre, C 14/2 Talwandi, Nursery Road, Kota Raj. (Name & Address of the Unit)
2. That I ANJALI SHARMA Partner (With name & designation) and authorized to sign the consent application form and owner enclosure with the application.
3. That the plot area of the unit is 83.612 Sq. Meters or 900 Sq. feet .
4. That the number of workers proposed to carry out various activities in the unit is 0 .
5. That the total number of employees in the unit is 10 .
6. That the total capital investment proposed on land, Building, Plant & machinery of the project is Rupees.....
7. That there is no effluent discharge from the premises. (applicable only in the case of dry of units)
8. That all adequate measures to consent water/air pollution from the various processes/activities shall be taken to meet the preserved standards as per the Environment (Protection) Rules, 1986 as attended in date.
9. That the adequate Pollution Control Measures as required shall be provided to meet the prescribed standards.
10. That the adequate emission Control system (ECS) of required shall be provided to meet the prescribed standards.
11. That the adequate Pollution Control measures shall be taken to meet the prescribed ambient norms Standards.
12. That if Diesel Generator sets of capacity 5 KVA or more) shall be installed, it will be Eco-friendly or with inbuilt acoustic enclosure to meet the prescribed norms w.r.t. noise as per the Gazette Notification of Ministry of Environment & Forests, Government of India, Dated 02.01.1999 Adequate stack height with D.G. Set (s) shall also be provided and maintained and shall submit noise monitoring report.
13. That the membership of CETP of existing and or likely to the set-up by any society of the industrial area shall be taken.

IDENTIFIED BY
Dipak
9001702582

ATTESTED
19/10/2020

Place: Kota
Date: 19-10-2020

RELIABLE
DIAGNOSTIC CENTRE
DEPONENT
Kots (Raj.)

VERIFICATION

Verified at Kota...(place) on this ...19-10-2020, (day, month and year) that the above contents of this affidavit are true and correct to best of my knowledge and belief and nothing has been concealed there from.

RELIABLE
DIAGNOSTIC CENTRE
DEPONENT

I ANJALI SHARMA Partner (with name and designation) W/o Shri Krishna

21 Kant Sharma R/o C 14/2 Talwandi, Nursery Road, Kota do solemnly affirm and declare as under:-

1 That I am responsible for operating the ~~Hospital/Nursing Home/Clinic/Dispensary/Pathological lab/...Pathological Lab...etc.~~ named M/s..Reliable

Diagnostic Centre,
Address. C 14/2 Talwandi, Nursery Road, Kota

Tel. No., Fax....., Mobile. 7414889990 ..

E-mail..rdckota1@gmail.com...

2 That I ANJALI SHARMA Partner (With name & designation) am authorized to sign the authorisation application form and other enclosure with the application.

3 That the hospital has been commissioned/made operative since..... and the number of beds are Not Applicable

IDENTIFIED BY

*Asst
19/10/2020*

4 That all the conditions mentioned in the previous authorisation for compliance of various provisions of the Bio-Medical Waste (Management & Handling) Rules, 1998 have been complied. Applied for the first time.

5 That the agreement with operator of facility/transporter of the Bio-Medical Waste has been completed (if applicable). Available

6 That the Bio-Medical Waste generated is managed effectively in accordance with the handling and disposal methods mentioned in Bio-Medical Waste (Management & Handling) Rules, 1998. Yes

7 That in case of any change in the location or information provided above or in Form I, a fresh application of authorization shall be submitted. Yes

8 An application for renewal of authorisation shall be submitted to RPCB one month in advance of the date of expiry the authorisation by the RPCB. Yes

9 When there is any change in name of ~~Hospital/Nursing Home/Clinic/Dispensary/Pathological lab/.....~~ I shall inform the Board (RPCB). Yes

That capital investment of the Hospital/Nursing Home/Clinic/Dispensary/Pathological lab/..... is Rs..... (Rupees

Note: Please omit whatever is not applicable

Place: Kota

Date: 19-10-2020

ATTESTED
19/10/2020
ISHAN JAIN
(MAGISTRATE)

RELIA
DIAGNOSTIC
DEPONENT
Kota (R)

VERIFICATION

Verified at Kota...(place) on this ...19-10-2020. (day, month and year) that the above contents of affidavit are true and correct to best of my knowledge and belief and nothing has been concealed there from.

RELIABLE
DIAGNOSTIC CENTRE

I ANJALI SHARMA Partner (with name and designation) W/o Shri Krishna Kant Sharma R/o C 14/2 Talwandi, Nursery Road, Kota do solemnly affirm and declare as under:-

1 That I am responsible for operating the Hospital/Nursing Home/Clinic/Dispensary/Pathological lab/...Pathological Lab...etc. named M/s..Reliable Diagnostic Centre, Address. C 14/2 Talwandi, Nursery Road, Kota Tel. No., Fax....., Mobile. 7414889990., E-mail. rdckota1@gmail.com..

2 That I ANJALI SHARMA Partner (With name & designation) am authorized to sign the authorisation application form and other enclosure with the application.

3 That the hospital has been commissioned/made operative since..... and the number of beds are Not Applicable

IDENTIFIED BY
Rajak
19/10/2020

4 That all the conditions mentioned in the previous authorisation for compliance of various provisions of the Bio-Medical Waste (Management & Handling) Rules, 1998 have been complied. Applied for the first time.

5 That the agreement with operator of facility/transporter of the Bio-Medical Waste has been completed (if applicable). Available

6 That the Bio-Medical Waste generated is managed effectively in accordance with the handling and disposal methods mentioned in Bio-Medical Waste (Management & Handling) Rules, 1998. Yes

7 That in case of any change in the location or information provided above or in Form I, a fresh application of authorization shall be submitted. Yes

8 An application for renewal of authorisation shall be submitted to RPCB one month in advance of the date of expiry the authorisation by the RPCB. Yes

9 When there is any change in name of Hospital/Nursing Home/Clinic/Dispensary/Pathological lab/..... I shall inform the Board (RPCB). Yes

10 That capital investment of the Hospital/Nursing Home/Clinic/Dispensary/Pathological lab/..... is Rs..... (Rupees

Note: Please omit whatever is not applicable

Place: Kota
Date: 19-10-2020

RELIABLE
DIAGNOSTIC CENTRE
Ashwini DEPONENT
Kota (Raj.)

ATTESTED
19/10/2020
ANJALI SHARMA
PARTNER

VERIFICATION

Verified at Kota...(place) on this ...19-10-2020. (day, month and year) that the above contents of this affidavit are true and correct to best of my knowledge and belief and nothing has been concealed there from.

RELIABLE
DIAGNOSTIC CENTRE

पचास
रुपये
रु.50

FIFTY
RUPEES
Rs.50

INDIA NON JUDICIAL



कोषाधिकारी **कोटा**
RAJASTHAN

11 SEP 2020

AP 953185

CONSENT TO OPERATE

AFFIDAVIT

I ANJALI SHARMA Partner (With name and designation) W/o Shri ... KRISHNA KANT, R/O C 14/02, TALWANDI, NURSERY ROAD, KOTA RAJ. do solemnly affirm and declare as under-

- 01 That I am responsible for establishing/operating the unit named M/s... Reliable Diagnostic Centre, C 14/02, Talwandi, Nursery Road, Kota Raj (Name & address of the unit)
- 02 That I ANJALI SHARMA Partner (With name & designation) and authorized to sign the consent application form and owner enclosure with the application.
- 03 That the plot area of the unit is 83.612 Sq. Meters or 900 Sq. feet.
- 04 That the number of workers proposed to carry out various activities in the unit is 0.
- 05 That the total number of employees in the unit is 10.
- 06 That the total capital investment proposed on land, Building, Plant & machinery of the project is Rupees.....
- 07 That there is no effluent discharge from the premises. (applicable only in the case of dry of units)
- 08 That all adequate measures to consent water/air pollution from the various processes/activities shall be taken to meet the preserved standards as per the Environment (Protection) Rules, 1986 as attended in date.
- 09 That all the consent condition mentioned in the previous consent order has been complied.
- 10 That the adequate emission Control system (ECS) has been installed to meet the prescribed standards.
- 11 That the adequate Pollution Control measures have been installed to meet the prescribed Standards.
- 12 That for Diesel Generator sets of capacity KVA) acoustic enclosure/acoustic treatment has been provided to meet the prescribed norms w.r.t. noise as per the Gazette notification of Ministry of Environment & Forests, Government of India, Dated 02.01.1999 Adequate stack height with D.G. Set (S) has also been provided and maintained.

Note: Please omit whatever is not applicable

VERIFICATION

Verified at Kota on this (day, month and year) that the above contents of this affidavit are true and correct to best of my knowledge and belief and nothing has been concealed therefrom. I am applying for Consent to Establish under Air Act, 1981/Water Act, 1974 for a period of..... years and depositing consent fee Rs vide demand draft..... dated

RELIABLE
DIAGNOSTIC CENTRE

DEPONENT

IDENTIFIED BY

Reflex
18/09/2020

ATTESTED
18/09/2020
ANJALI SHARMA
PARTNER
KOTA RAJ

RELIABLE
DIAGNOSTIC
KOTA

FORM I

(See rule 8)

APPLICATION FOR AUTHORISATION

(To be submitted in duplicate.)

To

The Prescribed Authority
(Name of the State Govt/UT Administration)
Address.

1. Particulars of Applicant

- (i) Name of the Applicant : **ANJALI SHARMA**
(In block letters & in full)
- (ii) Name of the Institution : **Reliable Diagnostic Centre**
(iii) Address : , **C 14/02, Talwandi, Nursery Road, Kota Raj**
(iv) Tele No., Fax No. Telex No.: **(M) 741488990**

2. Activity for which authorization is sought:

- (i) Generation
- (ii) Collection √
- (iii) Reception √
- (iv) Storage
- (v) Transportation √
- (vi) Treatment
- (vii) Disposal √
- (viii) Any other form of handling

**3. Please state whether applying for rash authorization or for renewal:
(In case of renewal previous authorization-number and date)**

4. (i) Address of the institution handling
bio-medical wastes:

Hoswin Incinerator Pvt. Ltd.

(ii) Address of the place of the treatment facility:

(iii) Address of the place of disposal of the waste:

5. (i) Mode of transportation (in any) of bio-medical waste:

(ii) Mode(s) of treatment:

6. Brief description of method of treatment and disposal (attach details):

7. (i) Category (see Schedule 1) of waste to be handled

(ii) Quantity of waste (category-wise) to be handled per month

8. Declaration

I do hereby declare that the statements made and information given above are true to the best of my knowledge and belief and that I have not concealed any information.

I do also hereby undertake to provide any further information sought by the prescribed authority in relation to these rules and to fulfill any conditions stipulated by the prescribed authority.

RELIABLE
DIAGNOSTIC CENTRE
Kota (Raj.)

Date: 18/10/2020 Signature of the Applicant

Place: Kota Designation of the Applicant

Shrotriya
Partner

FORM II

(See rule 10)

ANNUAL REPORT

(To be submitted to the prescribed authority by 31 January every year).

1. Particulars of the applicant:

- (i) Name of the authorized person (occupier/operator):
- (ii) Name of the institution:

Address

Tel. No

Telex No.

Fax No.

2. Categories of waste generated and quantity on a monthly average basis:

3. Brief details of the treatment facility:

In case of off-site facility:

(i) Name of the operator

(ii) Name and address of the facility:

Tel. No.,

Telex No.,

Fax No.

4. Category-wise quantity of waste treated:

5. Mode of treatment with details:

6. Any other information:

7. Certified that the above report is for the period from

Date: 18/10/2020

Place: Kota

RELIABLE
DIAGNOSTIC CENTRE
Kota (Raj.)

Signature *Ashratija*

Designation Partner

FORM III

(See Rule 12)

ACCIDENT REPORTING

- | | |
|--|----|
| 1. Date and time of accident: | NA |
| 2. Sequence of events leading to accident | NA |
| 3. The waste involved in accident: | NA |
| 4. Assessment of the effects of the accidents on human health and the environment, | NA |
| 5. Emergency measures taken | NA |
| 6. Steps taken to alleviate the effects of accidents | NA |
| 7. Steps taken to prevent the recurrence of such an accident | NA |

Date: 18/10/2020

Place: Kota

RELIABLE
DIAGNOSTIC CENTRE
Signature *Kota (Raj.)*
Shobha
Designation Partner

ASSESSMENT FORMET FOR BMW RULRS COMPLIANCE

I. General	
1. Name & Address of Pathological Laboratory	Reliable Diagnostic Contro, C 14/02, Talwandi, Nursery Road, Kota Raj
2. Name of the BMW Controller of the Pathological Laboratory	Hoswin Incinerator Pvt. Ltd.
2a. Name & Designation of the Pathological Laboratory Incharge	<u>ANJALI SHARMA</u> Partner
2b. Numbers of Beds	0
2c. Date & Details of Previous Inspection	
2d. Previous Authorisation Details i.e. No. & Date of Issued & validity (if any)	
3. Quantity of BMW Generated (kg/day)	0.5
Category	Quantity (kg/day)
Category 1	
Category 2	
Category 3	
Category 4	
Category 5	
Category 6	
Category 7	
Category 8	
Category 9	
Category 10	
II. Administration	
1. Waste Management Committee Formed	Yes/No
2. Nodal Office of the Committee	Yes/No
3. Period of the Meeting of the committee held weekly/ fortnightly/monthly	Yes/No
3a. Date of Last Meting	
3b. Meeting chaired by	
3c. Follow up action	Yes/No
4. Reivew of decision of the committee follow up	
III. Training	
Frequency of training	
Date of last training	
No. of Persons trained so far	
No. of Persons trained atleast once	
No. of persons not at all attended	Yes/No
1. Training of Doctors w.r.t. BMW	Yes/No
2. Training of Nurses w.r.t. BMW	Yes/No
3. Training of health workers w.r.t. BMW	Yes/No

Segregation & Handling		Yes/No
IV.	Segregation	Yes/No
1.	Segregation	Yes/No
2.	Needle Destroyer Exists	Yes/No
3.	Syringe Cutter Exists	Yes/No
4.	Shredder Exists	Yes/No
5.	Sharp collecting system exists	Yes/No
6.	Chemical disinfection in use	Yes/No
7.	Use of coloured bags-sources of bags & quality A/B/C	Yes/No
8.	Labelling of coloured bags	Yes/No
9.	Separate wheel barrow used or not	Yes/No
10.	Labelling of wheel barrow	Yes/No
11.	Storage site exists	Yes/No
V.	Personal protective/Safety Measures	
1.	Use of gloves & face masks	Yes/No
2.	Disposable gloves	Yes/No
3.	Latex Surgical gloves	Yes/No
4.	Heavy duty rubber gloves	Yes/No
5.	Protective glasses	Yes/No
6.	Plastic Aprons	Yes/No
7.	Special footwears e.g. gum boots	Yes/No
VI.	Treatment	
1.	Incinerator	Yes/No
2.	Capacity	Yes/No
3.	Temperature of chamber I is maintained as prescribed norms	Yes/No
4.	Temperature of chamber II is maintained as prescribed norms	Yes/No
5.	Stack height	Yes/No
6.	Sanitation at incinerator site	Yes/No
7.	Waste water treatment at site	Yes/No
8.	Log book of incinerator maintained or not	Yes/No
9.	Name and address of Hospital utilised for incineration	Yes/No
10.	Quantity of BMW being incinerated as shared (kg/day)	Yes/No
11.	Autoclaving facility exists	Yes/No
12.	Microwave exists	Yes/No

VII		Other information		
1.	Is BMW collection register maintained			Yes/No
2.	Name of service provider			
3.	If the BMW is being store for 24/48/72 hours			A/B/C/D
4.	Present grading			Yes/No
5.	Remarks			
VIII.		Water & Air Pollution		
1.	Water Consumption			
2.	Waste Water Form utilities i.e. toilet, kitchen etc.			
	A. Quantity			
	B. Treatment			
	C. Disposal arrangment			
3.	Air Pollution		Fuel	Whether infrastructure facility provided for monitoring
	Source	PCM	Stack height	
			From G.L.	Above
			Type	Consumption per hour

RELIABLE
DIAGNOSTIC CENTRE
 Kota (Raj.)

Anjali Sharma *Anjali*
 Name & Signature of the Applicant



G 278726

राजस्थान RAJASTHAN



PARTNERSHIP DEED



THIS DEED OF PARTNERSHIP MADE ON THIS Date 26-05-2018 AT JAIPUR BETWEEN:

- (1) AABHA GUPTA W/O SHRI G.N. GUPTA, AGE 51 YEARS, R/O B-16, MATHUR VAISHYA NAGAR, P.O. AIRPORT, JAIPUR. (HEREINAFTER CALLED THE PARTY OF THE FIRST PARTY).
- (2) DISHEBH GUPTA S/O SHRI G.N. GUPTA, AGE-26 YEARS, R/O B-16, MATHUR VAISHYA NAGAR, P.O. AIRPORT, JAIPUR. (HEREINAFTER CALLED THE PARTY OF THE SECOND PARTY).
- (3) Mrs. Apjall sharma w/o Mr. Krishna kant , AGE -33, R/O 56-DARWAJA, PIRAWA, JHALAWAR-326034 (HEREINAFTER CALLED THE PARTY OF THE THIRD PARTY);
- (4) SANTOSH KUMAR SHARMA S/O SHRI OM PRAKASH SHARMA AGE = 36 R/O 457, MAHAVEER NAGAR, TONK ROAD, JAIPUR 302018 (HEREINAFTER CALLED THE PARTY OF THE Forth PARTY).

Aabha Gupta
Aabha Gupta

[Signature]

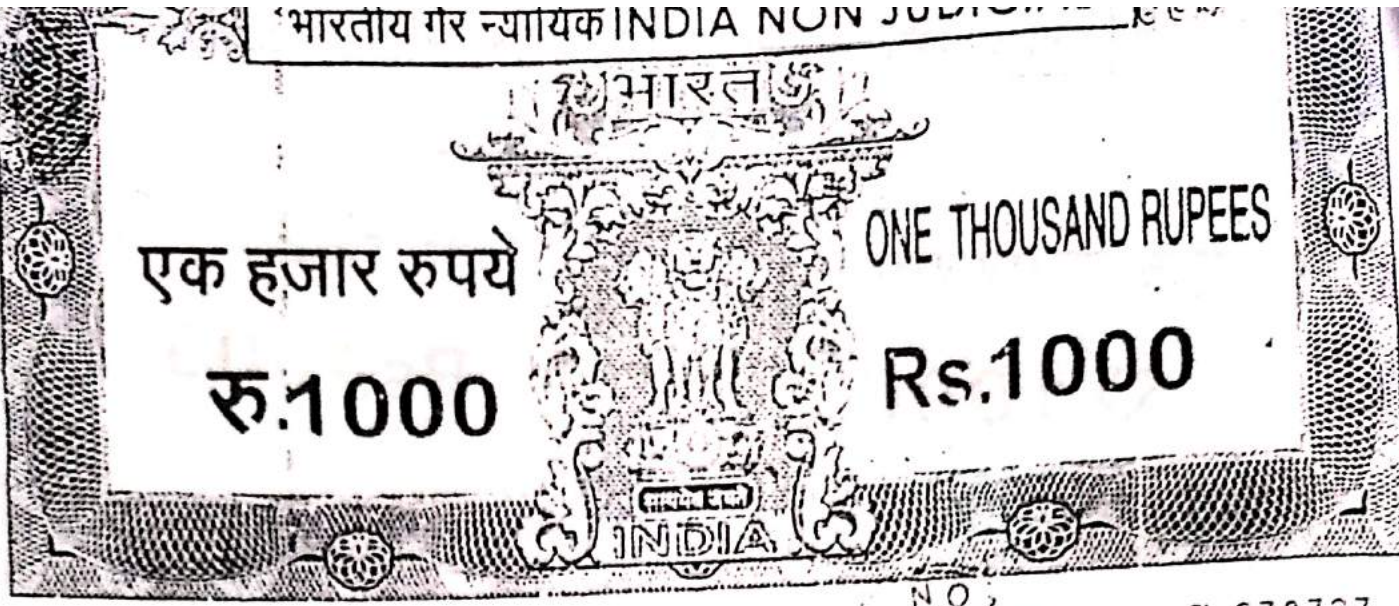
[Signature]

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ATTESTED
[Signature]
Notary Public
Jaipur

13 JUN 2018

Ajmotiya
RELIABLE
DIAGNOSTIC CENTRE
Kota (Raj.)

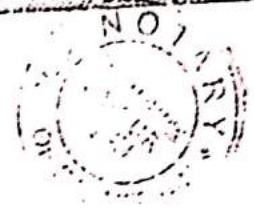


एक हजार रुपये
रु.1000

ONE THOUSAND RUPEES
Rs.1000

राजस्थान RAJASTHAN

G 278727



AND WHICH expression shall include unless exclude by context their respective heirs, administrators, legal representatives, survivors, executors and trustees.

AND WHEREAS the partners are carrying on business of pathology laboratory and diagnostic centre with facilities of Pathology, X-Ray, ECG, Sonography, pulmonary and other testing relating to Medical and other business also be carried on which the mutual consent of the parties. Under the Name and style of M/S RELIABLE DIAGNOSTIC CENTRE, House No. E-11, Lohagal Road, Shastri Nagar, Ajmer (Rajasthan) 305001.

AND WHEREAS in Pursuance of the said agreements, the parties here to covenant to become partners and order to safe guard their respective right and interests and to avoid any misunderstanding/disagreement and/or dispute and regarding the conduct of partnership affairs; and desirous to reduce the term & condition of the partnership into writing.

[Handwritten signatures]

(P) Aabla Gupta
Aabla Gupta

[Handwritten signature]

ATTESTED
[Signature]
Notary Public
Ajmer

19 JUN 2019

[Handwritten signatures]



THIS WITNESS THAT THE PARTNERS HERE TO MUTULLY AS FOLLOWS:

1. That the deed of partnership is and shall be deemed to have come in to force with effect from the date of 1.4.2018. That the name and style of partnership firm/business shall be M/S RELIABLE DIAGNOSTIC CENTRE at House No E-11 Lohagal Road Shastri Nagar Ajmer Rajasthan 301001 Or any other name as may be mutually agreed by the partners
2. That the business of partnership shall be carrying on business of pathology laboratory and Diagnostic centre with facilities of pathology X-Ray, ECG, Sonography, Pulmonary and other testing relating to medical. That the business shall be carried at House No E-11 Lohagal Road Shastri Nagar Ajmer Rajasthan 301001 or anywhere in India at such other places or the parties may from time to time agree upon
3. That the capital required for the purpose of business the firm shall be arranged and contributed by all the parties as and when required
4. That the employees of the firm shall be administration & be appointed by the consent of all the parties. No any appointment of a new employee shall be made without the consent of the parties
5. That the partners may open one or more bank account in any bank in name of the partnership firm of any other name at any place or places as mutually agreed/decided by all the partners and shall be operated by any parties of partnership firm or by the person authorized by the partner.
6. That all necessary and proper books of account on respect of the partnership firm/business shall be maintained and all the parties the partners of the their duly authorized agent of agents shall be entitled to have free and unhampered access to such books and records of the partnership firm at all reasonable times.
7. The accounting year of the firm shall end on 31st march every year and at the end the year, profit and loss account and balance-sheet shall be prepared and approved by all the partners.
8. That the party of Third part and forth part shall be entitled to remunerate from 01st April 2018 @ Rs. 17,500/- (Rupees Seventeen Thousand Five Hundred Only/-) per month SEPERATELY for Ajmer Branch and entitled to remunerate from 01st June 2018 @ Rs. 17,500/- (Rupees Seventeen Thousand Five Hundred Only/-) SEPERATELY for Kota Branch as long as the third and forth part solely work in favor of the lab with a minimum attendance of 20 days, if not maintained, the party of third part or fourth part shall appoint a person from their remuneration as General Manager at the lab whose remuneration will be solely beared by the third or the forth party and

[Signature]

ATTESTED
[Signature]

[Signature]
Aakha Gupta

11/11/2018

[Signature]

[Signature]

Aamohiya



the company shall only reimburse for local ~~costs~~ ^{expenses} used for marketing purpose in full but not for the inter city travels.

9. That the profits and losses of the partnership after making all necessary adjustments shall be distributed and born by the partners in the following proportions:

Party of the First part	:	25%
Party of the Second part	:	25%
Party of the Third part	:	25%
Party of the Forth part	:	25%

10. That all the parties of the partners shall be just and faithful to each other's relating to the business and affairs of partnership and shall give a true and fair account and full information of all the things and matters relating to the same to each others as often as they shall be required to do so.

11. That the partners shall carry on the business of the partnership to almost advantage and shall not do anything which may be deterring mental to the interest of the partnership.

12. That no outsider shall be admitted to this partnership firm/business without the consent of the all the partners.

13. That the duration of the partnership is at will of the partners who may sever his connection from the firm/business by giving one months, notice in writing, of his intention to do so to the remaining partners and on the expiration of such notice period the firm shall stand dissolved as regards the party or parties giving such notices (s), the period of notice can be reduced/waived if mutually agreed upon by the partners.

14. In the event of death of any partner the firm shall not be dissolved but the legal heir of the deceased partner shall be admitted as a partner in his/her place.

15. That in the event of any dispute of the parties to the deed, no party shall be straight away rush to court of law. The dispute shall be decided by the majority decision of the parties, others the partners refer the dispute amongst the arbitrators nominated by the parties of the partnership.

16. That for all the condition not mentioned here in the partnership agreement shall be governed by the Indian partnership act, 1932.

~~Signature~~
~~Signature~~
 ATTESTED
 Notary Public
 Jaipur
 13 JULY 2018
 Aabla Gupta
 Aabla Gupta
 Signature
 Signature
 Signature



That any other provision concerning the business of partnership for which no provision has been made in this deed shall be decided by the partners by mutual consent and such decision shall be deemed to part of this deed.

18 That it shall be open to the parties at any time to mutually agree to add after or delete any terms and condition in the event of such addition, alteration or amendment the same shall be incorporated as addenda or addendum as the case may be to the deed.

19 All the parties have agreed that if any opportunity is present in the district and surroundings of Ameer Kotla than first priority of entering into the similar business shall be given to the partners and only after the consent of all parties the business can be commenced.

20 If any of the parties are not willing to part in a new venture than other parties have the right to commence similar business.

IN WITNESS whereof the party above named has set their respective hands on the date, month and the year first above mentioned.

Identified by
WITNESS

(1) Neelika Gupta
 (Smt. Neelika Gupta)
 First Party

~~_____~~ Mr. Dinesh Gupta
 (Mr. Dinesh Gupta)
 Second Party

(2) _____
 (Mr. _____)
 Third Party

_____ _____
 (Mr. _____ & _____)
 (Sharma)
 Fourth Party

(3) Neelika Gupta



GOVERNMENT OF RAJASTHAN

**District Registering Authority
KOTA**

CERTIFICATE OF PROVISIONAL REGISTRATION

This is to certify that *RELIABLE DIAGNOSTIC CENTR* located at *C-14/2 TALWANDI NURSERY YOJNA* owned by *ANJALI SHARMA* has been granted provisional registration as a clinical establishment under Section 15 of The Clinical Establishments (Registration and Regulation) Act, 2010. The Clinical Establishment is registered for providing medical services as a *Pathology,Haematology,Biochemistry,Microbiology,Collection Centre* under *Allopathy* System of Medicine.

This Certificate is valid for a period of one year from the date of issue.

DRA: Kota

Designation of the Issuing Authority
डॉ० वी० प्रकाश चौरा
मु० चि० एवं स्वा० अवि०
कोटा

Place: Kota

Date of Issue: 02/07/2021

*Terms and Conditions of Registration**

1. The holder of this Certificate of Registration shall comply with all the provisions of Clinical Establishment Act (Registration and Regulation) 2010 and the Rules made there under.
2. The Certificate of Registration is not transferable. The Certificate of Registration shall be displayed in a prominent place in a part of the premises open to the public.
3. Any change of ownership or change of category or change of management or on ceasing to function as a clinical establishment, the certificate of registration shall be surrendered to the authority and application for fresh registration submitted.

*Additional terms and conditions are as stipulated by the appropriate registering authority.