



MAHARASHTRA POLLUTION CONTROL BOARD

Jog Center, 3rd floor, Mumbai Pune Road, Wakdewadi, Pune - 411003.

Phone no:020 - 25816451

website: www.mpcb.gov.in email: sropune2@mpcb.gov.in



Combined Consent and Bio-Medical Waste Authorization (CCA)

(under the provisions of Water (P&CP) Act, 1974, Air (P&CP) Act, 1981, Environment (P) Act, 1986 and rules made there under including BMW Management Rules, 2016, Amendment Rules, 2018)

1. Unique Application Number : **MPCB-BMW_AUTH-0000051398**
2. File Outward Number : **SRO-PUNE II/BMW_AUTH/2405000136 - 2024**
3. Date of Issue: **20-May-2024**
4. CCA Validity: **20-May-2027**
(subject to having valid membership of Common BMW Treatment Facility in the jurisdiction authorized by MPCB)

5. **Dr. CHAITALI PARESHKUMAR VISPUTE** an Authorized Person (occupier) of the health care facility located at **ADVANCE-TECH PATHOLOGY LAB, KAZI COMPLEX, OLD PUNE-NASHIK HIGHWAY, MAHATMA FULE CHOWK, CHAKAN, KHED, Pune-410501** is hereby granted an Combined Consent and Bio Medical Waste Authorization for **Generation, Segregation of Bio Medical Waste** under the provisions of Bio Medical Waste Management Rules, 2016, as amended time to time.

6. Terms and Conditions of Combined Consent and BMW Authorization (CCA):

The CCA is subject to the condition stated below and to such other condition as may be specified under provisions of Water (P&CP act 1974), Air (P&CP act 1981, Environment (P) act) 1986 and Rules made there Under including BMW Management Rules, 2016,

1. You are hereby authorized for Generation and Handling of Bio Medical Waste as stated below in accordance with provisions of **Schedule -I (Part 1 & 2)** of BMW Rules 2016:

Category of Waste	Type of Bag or Container to be used	Quantity (Kg/Month)
Yellow	Yellow coloured non-chlorinated plastic bags	5
Red	Autoclave safe plastic bags or containers	5
White(Translucent)	Puncture proof, Leak proof, tamper proof containers	3
Blue	Puncture proof, Leak proof boxes or containers with blue colored marking	3

2. You shall handover the BMW generated in specified bag/container duly labelled with "Barcode" to **LIFE SECURE ENTRPRISES** in compliance of provision of Rule 8 of BMW Rules 2016.

3. You shall maintain records related to the Generation and Handling of Bio Medical Waste, for a period of **FIVE years**. All records shall be subject to inspection and verification by the prescribed authority.
4. You shall submit an Annual Report to the prescribed authority i.e. the authority granting this CCA every year before 30th June for Jan-Dec of the preceeding year.
5. In case of any change for which CCA is granted, you shall forthwith inform in writing about the change and shall submit a fresh CCA application in Form II for modification of the conditions of CCA. Any unauthorised change in location, personnel, equipment or working conditions as mentioned in the application by the person authorised shall constitute a breach of this CCA, and shall be deemed to be invalid.
6. The person authorized shall not rent, lend, sell, transfer or otherwise transport the biomedical wastes without obtaining prior written permission of the prescribed authority.
7. You shall comply with the provisions of Water (P&CP act 1974), Air (P&CP act 1981, Environment (P) act) 1986 and Rules made there under including BMW Management Rules, 2016, as amended.
8. You shall produce duly signed and sealed copy of CCA for inspection on request of an officer authorised by MPCB.
9. It is the duty of the authorised person to take prior permission of the prescribed authority to close down the facility and to comply with such other terms and conditions stipulated by the prescribed authority.
10. In case of any violation, Authorized Person and/or Health Care Establishment shall be liable for all the damages caused to the environment or the public due to improper handling of Bio Medical Wastes and shall also be liable for action under Section 33A of Water (P&CP) Act, 1974 and Section 31A of Air (P&CP) Act, 1981 and Section 5 and Section 15 of the E(P) Act, as applicable.

Shri. Vidyasagar Killedar
Sub-Regional Officer
(For and on behalf of Prescribed Authority, MPCB)



महाराष्ट्र दुकाने व आस्थापना (नोकरीचे व सेवाशर्तीचे विनियमन) नियम, २०१८
नमुना "ग"
(नियम ९ पहा)

सूचना दिल्याबाबत पावती



अर्जदाराने नमुना फ द्वारा व्यवसाय सुरु केल्याबाबतची सूचना खाली नमूद केलेल्या तपशीलासह या कार्यालयास दिलेली आहे. त्याचा तपशील पुढीलप्रमाणे:

१.	पावती क्रमांक	:	२४३१०००३१८६६३६७२								
२.	अर्जाचा (सूचनापत्राचा) आयडी क्रमांक	:	१०३०७६५७२४०३								
३.	आस्थापनेचे नाव	:	एड्वान्स टेक पॅथॉलॉजी लॅब ADVANCE TECH PATHOLOGY LAB								
४.	कामगारांची एकूण संख्या	:	७								
			<table border="1"><thead><tr><th>पुरुष</th><th>स्त्री</th><th>इतर</th><th>एकूण</th></tr></thead><tbody><tr><td>२</td><td>५</td><td>०</td><td>७</td></tr></tbody></table>	पुरुष	स्त्री	इतर	एकूण	२	५	०	७
पुरुष	स्त्री	इतर	एकूण								
२	५	०	७								
५.	अ) मालकाचे नाव	:	चैताली परेशकुमार विसपुते CHAITALI PARESHKUMAR VISPUTE								
	ब) आस्थापनेचा पत्ता	:	काझी कॉम्प्लेक्स, ओल्ड पुणे नाशिक हाईवे, महात्मा फुले चौक, चाकण, चाकण (शहर), खेड, पुणे, ४१०५०१								
६.	सदरची पावती ही केवळ अर्जदाराने त्याचा व्यवसाय सुरु केल्याबद्दल कार्यालयास पाठविलेल्या सूचना पत्राची पोच पावती असून व्यवसाय अथवा व्यवसायाची जागा अस्तित्वात असल्याबद्दलचा पुरावा नाही. व्यवसायासाठी व व्यवसायाच्या जागेसाठी आवश्यक असणारी संबंधित सक्षम प्राधिकारी यांच्याकडील पूर्व / पश्चात परवानगी, अनुज्ञप्ती, परवाना धारण करण्याची सर्वस्वी जबाबदारी मालकाची राहिल. ही पोच पावती व्यवसायाच्या जागेचा मालकी हक्क किंवा मालमत्तेचा मालकी हक्क किंवा ताबा या प्रयोजनार्थ कोणत्याही कायद्यांतर्गत ग्राह्य धरता येणार नाही.										
७.	व्यवसायाचे स्वरूप	:	पॅथॉलॉजी लॅबोरेटरी आणि डायग्नोस्टिक्स सेंटर / PATHOLGY LABORATORY & DIGNOSTIC CENTRE								
८.	पूर्वीचा नोंदणी प्रमाणपत्राचा क्रमांक व दिनांक, लागू असल्यास	:									

टीप : सदरची पोच पावती संगणकीय प्रणालीद्वारे तयार करण्यात आलेली असल्याने त्यावर स्वाक्षरीची आवश्यकता नाही. सदरची पोच पावती ही अर्जदाराने सादर केलेल्या स्वयंघोषणापत्र आणि स्वयंसाक्षात्कीत अभिलेखाद्वारे पडताळणी न करता देण्यात आलेले आहे.
सादर पोचपावती ही १० पेक्षा कमी कामगार असलेल्या आस्थापनांना नोंदणी दाखल्या ऐवजी देण्यात येते. त्यांना नमुना - ब मध्ये नोंदणी प्रमाणपत्र अनुज्ञेय होत नाही.

दिनांक : १४-०३-२०२४

ठिकाण : Pune

कार्यालयाचा पत्ता : Office of the Deputy Commissioner of Labour, Pune, Address- Pune District Bungalow No.५, Mumbai - Pune Road, Shivaji Nagar, Pune-४११००५

अर्जाचा आय.डी. क्रमांक	प्रदान केलेले सेवा मूल्य (रुपये)
१०३०७६५७२४०३	२३.६०



LIFE SECURE ENTERPRISES

Common Bio-Medical Waste Treatment, Storage & Disposal Facility
MIMER Medical College Campus, Talegaon Dabhade (Str.) Tal. Maval, Dist. Pune 410507
Helpline No. : +91 9130688438, E-Mail: lifesecure.mail@gmail.com



Unique Registration No.: LSE-PKHE-PL-2238



Registration Certificate

Offline QR

Online QR

Outward No. : LSE/OUT/CER/2024-25/248

Date : 08-May-2024

This is to certify that, ADVANCE-TECH PATHOLOGY LAB, KAZI COMPLEX, OLD PUNE-NASHIK HIGHWAY, MAHATMA PHULE CHOWK, CHAKAN Tal:- KHED, Dis.PUNE, Pin-410501 is registered with M/s LIFE SECURE ENTERPRISES, 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) | : Mrs. CHAITALI VISPUTE
: DOCTOR |
| 2 Bombay Nursing Home Act Registration Details | |
| a. BNH Registration No | : N/A |
| b. BNH Issue Date | : N/A |
| c. Total Number of Beds | : N/A |
| d. BNH validity (Form 'C') | : N/A |
| 3 Common Treatment Facility Registration Details | |
| a. Date of Registration | : 16-Mar-2024 |
| b. No. of Beds Registered | : N/A |
| c. Issue Date | : 01-Mar-2024 |
| d. Registration Validity | : 28-Feb-2025 |
| 4 Renewal of CTF Membership (if applicable) | |
| a. Renewal Date | : 28-Feb-2025 |
| b. No. of Beds | : N/A |
| 5 MPCB Consents (Establish/ 1 st Operator/Renewal Details) | |
| a. Consent / CCA Number | : N/A |
| b. Issue Date | : N/A |
| c. Validity upto | : N/A |




Authorized Signature

Name : Suhas R. Medsinge
Designation : Director

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