



## J&K POLLUTION CONTROL COMMITTEE

Jammu/Kashmir ([www.jkspcb.nic.in](http://www.jkspcb.nic.in))

### FORM III see rule 10

#### AUTHORIZATION (RENEWAL) FOR OPERATING A FACILITY FOR GENERATION, COLLECTION, RECEPTION, TREATMENT, STORAGE, TRANSPORT AND DISPOSAL OF BIO-MEDICAL WASTE

To

The Medical Superintendent,  
ESIC Model Hospital,  
Bari Brahamana, Jammu (J&K)

The Committee has scrutinized the information furnished by you and the proposal for management & handling of Bio-Medical Waste generated at your location mentioned below. After a careful consideration, it has been decided to grant authorization under Bio-Medical Waste Management Rules, 2016 (herein after to be called as BMW Rules) for a period and premises mentioned in this authorization

*Authorization No. JKPCC/digital/ 4800453 of 2025*

*Dated 05-03-2025*

ESIC Model Hospital is hereby granted an authorization to operate a facility for generation, segregation, collection, storage, packaging, Pretreatment, Transport and disposal of Bio-Medical Waste in the hospital is as under:

Type of waste category	Qty. Handled
Yellow	2.14 Kg/day
Red	3.87 Kg/ day
Blue	1.85 Kg/day
White	0.15 Kg/day

This authorization (renewal) shall be in force for a period upto **one year from the date of issue** with **50 Beds** capacity.

This authorization is subject to the conditions stated below and to such other conditions as may be specified in the rules for the time being in force under the Environment (Protection), Act, 1986.

#### Terms and Conditions of Authorization

1. The authorization shall comply with the provisions of the Environment (Protection) Act, 1986, and the rules made there under.
2. The authorization or its renewals shall be produced for inspection at the request of an officer authorised by the prescribed authority.
3. The person authorised shall not rent, lend, sell, transfer or otherwise transport the Bio-Medical Wastes without obtaining prior permission of the prescribed authority.
4. Any unauthorized change in personnel, equipment or working conditions as mentioned in the application by the person authorised shall constitute a breach of his authorization.
5. It is the duty of the authorised person to take prior permission of the prescribed authority to close down the facility.

#### Additional Terms and Conditions of Authorization

6. Treatment & Disposal of Bio-Medical Waste.
  - 1) Waste shall be treated & disposed off in accordance with schedule-I of the rules and in compliance with the standards prescribed in Schedule-V of the rules.

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- 2) The applicant shall set up requisite Bio-Medical Waste treatment facilities like autoclave, microwave system etc. wherever required for the treatment of waste or ensure treatment of waste at a common waste facility or any other waste treatment facility.

3) Standards for Incinerators:

- Combustion efficiency shall be at least 99.00 %.
- The temperature of the primary chamber shall be  $800 \pm 50^\circ\text{C}$ .
- The secondary chamber gas residence time shall be at least 1 (one) second at  $1050 \pm 50^\circ\text{C}$  with minimum 3% oxygen in the stack gas.
- Minimum Stack height – 30 meters above ground.
- Emission standards should conform to the following:

<u>Parameters</u>	<u>Maximum Permissible Limit</u> mg/Nm <sup>3</sup> at (12 % CO <sub>2</sub> correction)
Particulate matter	150
Nitrogen Oxides	450
HCl	50

- Volatile organic compounds in ash shall not be more than 0.01%.
  - Suitably designed air pollution control devices should be installed/retrofitted with the incinerator to achieve the above emission limits, if necessary.
  - Waste to be incinerated shall not be chemically treated with any chlorinated disinfectants.
  - Chlorinated plastics shall not be incinerated.
  - Toxic metals in incineration ash shall be limited within the regulatory quantities as defined under the Hazardous Waste (Management & Handling) Rules, 1989.
  - Only low sulphur fuels like L.D.O/L.S.H.S/Diesel shall be used as fuel in the incinerator.
  - A logbook for the operation & maintenance of incinerators shall be maintained including details of waste received, waste incinerated, fuel consumption etc.
- 4) Standards for waste autoclaving, micro waving as well as deep burial shall be as per Schedule V of the rules.

5) Effluent Standards:

The effluent generated should conform to the following limits:

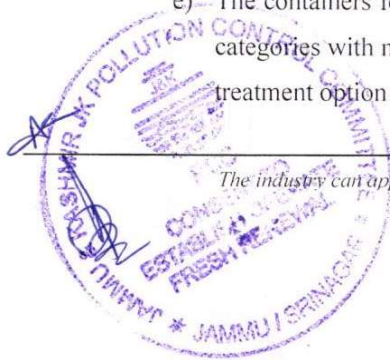
<u>Parameters'</u>	<u>Maximum Permissible Limit</u>
pH	6.5 to 9.0
Suspended Solids	100 mg/l
Oil & Grease	10 mg/l
BOD	30 mg/l
COD	250 mg/l

Bio-assay test 90% survival of fish after 96 hours in 100% effluent

6) Segregation & Storage of Bio-Medical Wastes:

- Bio-Medical Waste shall not be mixed with other wastes.
- Bio-Medical Waste shall be segregated into containers/bags at the point of generation in accordance with schedule II of the rules prior to its storage, transportation, treatment and disposal. The containers shall be labeled according to Schedule III of the rules.
- At the storage site "Bio-Medical Waste Storage Site" & "Danger" sign Committees shall be prominently displayed.
- The applicant shall take all steps to ensure that such Bio-Medical Waste is handled without any adverse effect to human health and the environment.
- The containers for storing segregated wastes shall be clearly identifiable. Colour coding of waste categories with multiple treatment options as defined in Schedule I, shall be selected depending on treatment option chosen, which shall be as specified in Schedule I of the rules.

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- f) No untreated Bio-Medical Waste shall be kept stored beyond a period of 48 hours provided that if for any reason it becomes necessary to store the waste beyond such period, the authorised person must take permission of the prescribed authority and take measures to ensure that the waste does not adversely affect human health and the environment.

7. Transportation of Bio-Medical Waste:

- i. If a container is transported from the premises where Bio-Medical Waste is generated to any waste treatment facility outside the premises, the container shall, apart from the label prescribed in Schedule III of the rules, also carry information prescribed in Schedule IV of the rules.
- ii. Untreated Bio-Medical Waste shall be transported only in such vehicles as may be authorised for the purpose by the competent authority. The transport vehicles shall be prominently labeled as per symbols shown in Schedule III of the rules.

8. General Conditions:

- i. When any accident occurs at any institution or facility or any other site where Bio-Medical Waste is handled or during-transportation of such waste the authorised person shall report the accident in Form III of the rules to the Committee forthwith.
- ii. Every applicant shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of Bio-Medical Waste in accordance with these rules and any guidelines issued.
- iii. All records shall be subject to inspection and verification by the Committee at any time.
- iv. Every applicant shall submit an annual report in Form II by 31<sup>st</sup> January every year, which shall include information about the categories & quantities of Bio-Medical Waste handled during the preceding year.
- v. The applicant shall be further required to obtain the following from the Committee:
  - a) Consent under the Water (Prevention and Control of Pollution) Act, 1974.
  - b) Consent under the Air (Prevention and Control of Pollution) Act, 1981.
  - c) Authorization under the Hazardous Wastes (Management and Handling) Rules-1989.
  - d) Authorization to operate the DG Set.
- vi. The authorization granted shall lapse at any time if the facility does not demonstrate the parameters, as required under rules or any condition of this authorization order is not complied with.
- vii. The authority of hospital shall ensure the scientific disposal of Bio Medical waste generated by the hospital strictly as per BMW(M&H) rules 1998 as amended and through CBMWTF duly authorized by Committee.
- viii. Mercury generated due to the breakage of medical equipments such as thermometer , B.P apparatus etc. , should not be disposed off along with Bio-Medical or general Waste. It should be separately handled and disposed as per Hazardous Waste (Management & Handling ) Amendment Rules, 2003. Mercury and Mercury compounds waste with concentration limit equal to or more than 50 mg/Kg has to be disposed off as per the said rules.
- ix. Proper labeling (Bio Hazardous ) should be done which should be non washable and permanently visible.
- x. Mutilation & treatment should be given to waste sharps (cat 04) before it is sent to the Common Bio Medical Waste Treatment facility.
- xi. The authority should apply 60 days in advance for renewal of authorization before expiry of same.
- xii. The emissions or discharge of environmental pollutants from the hospital shall not exceed the relevant parameters and standards for the said hospital operation or process specified under respective schedules of the Environment (Protection) Rules , 1986 as amended from time to time.

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- xiii. This authorization is issued with the condition that proof of ETP and self monitoring report shall be submitted within three months along with proof of Solid Waste disposal facility under SWM Rules , progress of phasing out use of chlorinated plastic bags , gloves and blood bags , proof of digital weighing machine and scanner , log book of BMW and bar code management software working and receipt of data and reflection on to the website , annual report , insurance cover of waste handlers and training given to such hospital staff etc.

#### Specific Conditions

1. The Hospital Management has to operate all requisite pollution control devices in the Hospital as envisaged under Bio-Medical Waste Management & Handling Rules.
2. The Hospital Management shall adhere to general terms and conditions of Water (Prevention and Control of Pollution) Act, 1974 and Air (Prevention and Control of Pollution) Act, 1981 and ensure compliance of environment standards as per EP Act 1986 and as amendments made thereof.
3. The Hospital Management shall handover the waste generated to CBMWTSDF at Samba.
4. The Hospital Management shall install Color coding bins with proper labeling in the hospital. Segregation of waste must be done at sources.
5. The Hospital Management shall maintain the log book of BMW/ ETP and keep them operational during the operation of the HCF in case of default the consent / Authorization shall be withdrawn
5. The Hospital Management shall remain under surveillance of the JKPCCE regularly.

#### Penalty Provisions:

*If the applicant fails to comply with the terms and conditions and other directives issued by this Committee as laid down in this order, the applicant is liable for prosecution under Section 15 of the Environment (Protection) Act 1986 and other penal provisions of the Act and shall on conviction be liable for punishment and imprisonment as provided in the said Act.*



(A.B. Jandial)

Asstt. Environmental Engineer

ss"By Order"

  
Member Secretary

6.3.25

Copy to the:-

1. Regional Director, J&K PCC Jammu for information.
2. Director, Health Department, Jammu for information.
3. District Officer, PCC, Samba (North) for information .
4. P.A to Chairman J&K PCC for the information of Chairman.
5. ESIC Model Hospital, Bari Brahmana, Jammu for information
6. Office File

