

Bio- Medical Waste Management

MONTHLY REPORTS

Date: 28/02/2025

3) Particular Of the applicant:

- (iii) Name of the authorized person (occupier/operator) - Mr. Sandeep Sagvekar.
(iv) Name & address of the Institution National Institute of Ophthalmology,
(1187/30 Off Ghole Road Shivajinagar, Pune- 411005)

4) Category of waste (as per Schedule -I of the rule) generated and quality on a monthly. Average basis.

| Category | Waste Quantity | Kg |
|----------|----------------|------------|
| YELLOW | 67/- | 185.152/- |
| RED | 38/- | 127.942/- |
| WHITE | 4/- | 8.715/- |
| BLUE | 7/- | 725.74/- |
| TOTAL | 116/- | 1047.549/- |

Certified that the above report is for the period from - 01/02/2025 to 28/02/2025

Signature

Aditya Kulkarni

Designation: Medical Director

