

FORM-II

(See Rule 10)

ANNUAL REPORT

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

1. Particulars of the applicant:

i. Name of the authorized person(occupier/operator):- Dr. Devi Prasad Mohapatra
M.O I/c,CHC Chandanpur

ii. Name of the Institution :- CHC Chandanpur

Address Birapratap Pur, Chandanpur

Tel.No. 06752(274373) & 9439994722

Telex No.

Fax No.

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

Sl.No.	Category	Quantity Kg/month
1	Human Anatomical Waste	60 KG
2	Waste Sharps	18 K.G
3	Solid Waste	20 Kg
4	Solid Waste (Disposable items other than waste)	45 Kg
5	Liquid Waste	60 Kld

3. Brief details of the treatment facility :- Dr.Devi Prasad Mohapatra,

M.O I/C,CHC Chandanpur

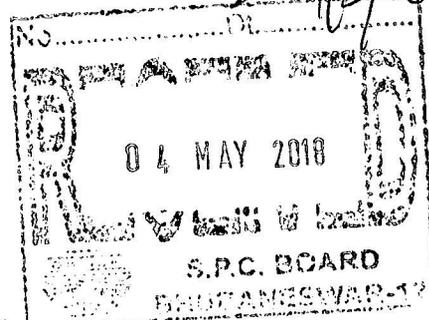
Ph.No.9439994722

In case of Off Site Facility:

i. Name of the Operator

ii. Name and address of the facility:-

iii. Tel No. , Telex No. , Fax No.



4. Category- Wise Quantity of waste treated:

Sl.No.	Category	Quantity Kg/month
1	Human Anatomical Waste	60 KG
2	Waste Sharps	18 K.G
3	Solid Waste	20 Kg
4	Solid Waste (Disposable items other than waste)	45 Kg
5	Liquid Waste	60 Kld

5. Mode of treatment with details

Sl.No.	Category	Mode of Treatment
1	Human Anatomical Waste	After treating with Hypochlorite solution , Human anatomical Waste is disposed in Deep Burial
2	Waste Sharps	It is treated with 1 % hypochlorite solution and disposed in the Sharp pit
3	Solid Waste	After treating with 1% hypochlorite Solution and disposed in an abandoned area
4	Solid Waste (Disposable items other than waste)	After chemical treating with 1% hypochlorite solution and liquid amount is drained and the solid waste is burned.
5	Liquid Waste	Disinfected by chemical treatment and discharge into drain

6. Any other information:

7. Certified that the above report is for the period from :- 1st February 2017 to 31st January 2018.

Date:-

Place:-


Medical Officer I/C
CHC, Chandanpur