

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 : DR . Bharati J. Dethe
(Occupier / operator)
(ii) Name of the institution : Indira IVF Clinic
Address : 2nd Floor Yamuna Jarang Complex ,Akola
Tel No. : 7230020381
Telex No. :
Fax No. :

2. Categories of waste generated and quantity : Cat. :- 4 5 6 7
On a monthly average basis.
Kg per month :- 3.2 4.3 5.4 6.5 700 lit/day

3. Brief details of the treatment facility -----

In case of off-site facility ----

(i) Name of the operator : GLOBAL ECO SAVE SYSTEMS AMRAVATI
(ii) Name and address of the facility : GLOBAL ECO SAVE SYSTEMS
DURGAPUR ROAD BADNERA AMRAVATI
Tel. No. :
Telex No. : 0721-2565493
Fax No. :

4. Category-wise quantity of waste treated :As Above
5. Mode of treatment with details : Incineration, Autoclave, Shredding etc.
6. Any other information :Not applicable
7. Certified that the above report is for the period from

1st January 2022 to 31st December 2022

Date : 27-01-2023

Place : Akola

Signature :-

Designation :-