

**BMW AUTHORIZATION**

Gujarat Pollution Control Board
Opp. Saint Annes Church
Station Road , Junagadh-362 001
Tele :02876-243564

Indian Rayon (A Unit Of Aditya Birla Nuvo Ltd) [374861]

Under the Rule 8(4) of the Biomedical waste (Management and Handling) (Amendment) Rules, 2003 framed under the EPACT'86.

AUTHORISATION NO :BMW-325169 (Out No : 11157)

VALID UPTO : 24/10/2018

Application Inw.no : 26836 , Date: 27/08/2015

File No :JNG-174

CBWTF No: 306040 , Valid Up to :06/06/2014

Granted On:28/08/2015

In exercise of power conferred by this Board and after scrutiny of above referred application; Superintendent / Incharge of **Indian Rayon (A Unit Of Aditya Birla Nuvo Ltd) at (a Unit Of Aditya Birla Nuvo Ltd),Veraval , Veraval Tal: Junagadh Dist : Junagadh** is hereby granted an Authorisation to operate Health Care facility for collection, storage, reception, transport, treatment and disposal of biomedical wastes on the premises of **M/S. Girnar Bio Medical Waste Services** situated at **Plot No. 1746,Gidc,Dolatpura Dist : JUNAGADH**

1.The Authorisation is granted for 0 nos. of beds with generation of

HUMAN	ANIMAL	LAB	SHARP	DISCARD	SOILED	SOLID	LIQUID	INCINERATION	CHEMICALS
0.000	0.000	0.000	3.000	0.050	3.500	2.500	0.000	0.000	0.000

category of biomedical wastes. (Unit - Kgs/Month)

2.This Authorisation shall be in force **for a period of 3 year[up to 24/10/2018]**

3.This Authorisation is subject to the conditions stated in the Annexure-I attached here with and to such other conditions as may be specified in the Rules for the time being in force under the Environment (Protection) Act 1986.

**For & On behalf of
Gujarat Pollution Control Board**



(Signature)

R.O Head: Junagadh

Specific Condition :

Encl.: Annexure-I

Issued to , Shri H. S. Dagur (Vice President -Technical), Indian Rayon (A Unit Of Aditya Birla Nuvo Ltd), (a Unit Of Aditya Birla Nuvo Ltd), Veraval , Veraval Tal :Junagadh Dist :Junagadh

Copy to Regional Office - Junagadh/ H.O

With a request to carry out periodically monitoring of above said hospital/clinic and submit the visit report to this Office.

