

Wabtec Locomotive Private Limited (erstwhile GL Diesell ocomotive Private Limited

Locomotive Shed Roza, Posl Roza, RS Shahjahanpur – 243 366, Utlar Pradesh Tel (+91) 584 235 4000 CIN U35990DL2015PTC285220 Fmall, nitin.chawla@wabtec.com Websile, w.w.wabtec.com.com

2023/WLPL/GSO/Roza/Misc/UPPCB/314

Date: 30th June 2023

To, Regional Officer E-1219/1, E-Block Rajendra Nagar, Awas Vikas Colony, Post-Izzat Nagar Bareilly

Subject: Annual Report (Form IV) under Biomedical waste (Bio- Medical waste Management rules, 2016)

Reference No: BMW Authorization - File no 4899913 dated 06-11-19

Dear Sir,

Please find enclosed duly filled Annual Report (Form 4) for the calendar year 2022 of biomedical waste generation and disposal under Biomedical waste rules 2016

This is for your information please

Thanking you,

Yours Sincerely

Wabtec Locomotive PvI Limited (Erstwhile GE Diesel locomotive Pvt limited)

· Authorised Signatory

Read Office: 11/37, Ground Floor, Old Raiinder Nagar, New Delhi- 110060.



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5.No Particulars		-	IT	-			
Particulars of the (-					
(i) Name of the a	(i) Name of the authorised person (occupier or operator of facility)			-			
(ii) Name of HCF or			Occupational Healt (Erstwhile GE Diese	h Centre -	Wabtec I tive Pvt Lir	ocomotive Pvi Limited	
(iii) Address for Co	(iii) Address for Correspondence		Wabtec locomotive Pvt Limited (Erstwhile GE Die Pvt Limited), Post Roza RS, Roza, District Shahjah 242306		hile GE Diesel Locomot ct Shahjahanpur Pin		
(iv) Address of Faci	(iv) Address of Facility		Wabtec locomotive Pvt Limited (Erstwhile Gt Diesel Locomot Pvt Limited), Post Roza RS, Roza, District Shablahanpur Pin				
(v)Tel. No. Fax. No.	(v)Tel. No, Fax. No		242306				
(vi) E-mail ID			Tel No. (+91) 584 23				
(vii) URL of Website	with the same of t	-	nltin.chawla@wabt	ec.com			
	es of HCF or CBMW F	Ť	Latitude: 27.861990	/Al Davin	al dagge	al /	
-		-	Longitude: 79.9538				
	(ix) Ownership of HCF or CBMWTF			State Government or Private or Semi Gov			
(x). Status of Author	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules		BMW Authorisation -file no 4899913 dated 06-11-19 (One Tin				
Waste (Managemer	rt and Handling) Rules		Validity)				
(x1). Status of Conse	nts under Water Act and Air Act	-	Valid up to:31 Dec 2 167403/UPPCB/8are /2022 dated 22/11/2	eilly(UPPC	o BRO)/CTC)/both/SHAHJAHANPU	
Type of Health Care	Facility	-			_		
(i) Bedded Hospital		1	No. of Beds: Nil				
(li) Non-bedded hos	pital	+	No. of Beas, Ivii	-	-		
(Clinic or Blood Bank Veterinary Hospital o	or Clinical Laboratory or Research Institute or or any other)	0	Applicable				
	and its date of expiry	:	8MW Authorisation - Validity)	-file no 48	99913 da1	ted 06-11-19 (One Tim	
Details of CBMWTF		1.	NA				
(i) Number healthcar	e facilities covered by CBMWTF	1	NA				
(ii) No of beds covere	ed by CBMWTF	1	NA				
(III) Installed treatm	ent and disposal capacity of CRMWTE	1	Kg per day - NA				
(lv) Quantity of biom	edical waste treated or disposed by CBMWTF	1:	Kg/day - NA				
Quantity of waste ge average basis)	Quantity of waste generated or disposed in Kg per annum (On monthly		Yellow Category : 1.4 Red Category : 3.223 White:1.451 kg / ann Blue Category :1.827	kg / annu um (0.120	m (0.268) kg/mont	kg/month) h]	
Details of the Flores	T	- 1 - 1	Gongest Folid moute.				
Details of the Storage	, treatment, transportation, processing and Disposal	Facili	ty				
	(i) Details of the on-site storage Facility		Size :- Covered Biomedical waste storage Area of Size 4.5 m2				
(i) Details of the on-			Capacity: Seperated colour coded bins have been arranged to collect Biomedical waste, stored prior to sending authorised disposal facility Provision of on-site storage: (cold storage or any other				
			orovision) - No, Biomedical waste is stored in colour co only				
*			Type of treatment equipment	No. of units	Capac Ry Kg/da y	Quantity treated or disposed in kg per ennum	
	(ii) Disposal facllities		Incinerators			NA	
			Plasma Pyrolysis			NA	
			Autoclaves			NA	
			Microwava			NA	
(ii) Disposal facilities			Hydroclave			NA	
The same of the sa			Stredder			NA	
			Needle tip cutter or destroyer Sharps encepsulation or			NA NA	
			concrete pit Deep burief pits:			NA	
			Chemical			ÑĀ	
			disinfection: Any other	-		NA	
			trestment				
		1 -	equipment:			ł	

	(iii)Quantity of recyclable waste sold to authorized recyclers after	T	
	treatment in kg per annum.	1	NA
Į	(iv)No of vehicles used for collection and transportation of biomedical	1	
	waste	1	NA
	(v) Details of incineration ash and ETP sludge generated and disposed		
	during the treatment of wastes in Kg per annum	1:	NA
1	(vi) Name of the Common Bio- Medical Waste Treatment Facility	T	
	Operator through which wastes are disposed of	1	S P Green Lights Environment Waste Management U.P.
	(vi) List of member HCF not handed over bio-medical waste	:	NA
	Do you have blo-medical waste management committee? If yes,		
6	attach minutes of the meetings held during the reporting period	1:	Yes (MoM Attached)
F	Details trainings conducted on BMW	:	Yes
1	(i) Number of trainings conducted on BMW Management.	:	2
	(ii) Number of personnel trained	:	8
7	(iii) Number of personnel trained at the time of induction	:	53
	(iv) Number of personnel not undergone any training so far	:	NII
	(v) Whether standard manual for training is available?	:	Yes, WLPL Guidelines
	(vi) any other information		NA
	Details of the accident occurred during the year	:	
	(i) Number of Accidents	:	1 Nos, Lost time injury
ĺ	(i) Number of Accidents occurred	-	1 Nos, Lost time injury
8	(ii) Number of the persons affected		1
	(iii) Remedial Action taken (Please attach details if any)	:	Engineering controls / Procedure in place, to avoid such incident in future
	(iv) Any Fatality occurred, details	:	Mil
	Are you meeting the standards of air Pollution from the incinerator?		
	How many times in last year could not met the standards?	÷	
9	The standards:		MA AM
	Details of Continuous online emission monitoring systems installed	:	NA
10	Liquid waste generated and treatment methods in place. How many		ETP / STP are installed at our premisis,
,,,	times you have not met the standards in a year?		Discharge norms are as per statutory requirement. Not defaulted in the year 2022.
	Is the disinfection method or sterilization meeting the log 4	1	,
11	standards? How many times you have not met the standards in a	:	
	year?		NA
12	Any other relevant information	:	
Cost	ifing that the above report is farther and of the AAAA as a		

Certified that the above report is for the period from 1 Jan 2022-31 Dec 2022

Date 28-Jun-23

Place Shahjahanpur

Name and Signature of the Head of the Institution.

Minutes of Meeting - OHC Committee

Member Present: - Dr. Pawan (Doctor), Ravi Sharma (HRM) Amit kabra (EHS), Mukesh Kumar (Admin), Shilpi (Paramedic Staff), Sanjeev (Ambulance Driver)

Date:- 31st March 2022

Salient Point of Discussion

SI.	Discussion Points	Responsibility	Target Date	Status
1	Trolly stand is required for Oxygen cylinder	Mukesh Tiwari	15 th April 2022	Completed
2	New partition should be kept in OHC.	Mukesh Tiwari	30 th April 2022	Completed
3	Replace side mirror of Ambulance.	Sanjeev / Mukesh Tiwari	10 th April 2022	Completed
4	New almirah should be precured for record keeping	Mukesh Tiwari	30 th April 2022	Completed



Minutes of Meeting - OHC Committee

Member Present: - Dr. Pawan (Doctor), Ravi Sharma (HRM) Amit kabra (EHS), Mukesh Kumar (Admin), Shilpi (Paramedic Staff), Sanjeev (Ambulance Driver)

Date :- 15th September 2022

Salient Point of Discussion

SI.	Discussion Points	Responsibility	Target Date	Status
1	Establish a tracking mechanism for expired medicine	Mukesh Tiwari	25 Sept 2022	Completed
2	Reverse horn of ambulance is not working (servicing)	Mukesh Tiwari	20 th Sept 2022	Completed
3	Maintain sufficient stock of Rabies injection	Sanjeev / Mukesh Tiwari	18 th Sept 2022	Completed
4	No shift shall be unmanned handover shall take place in presence of both shift staff.	Dr. Pawan / Mukesh Tiwari	30 th Sept 2022	Completed
5	Develop inspection checklist for ambulance.	Mukesh Tiwari	30 th Sept 2022	Completed

