



# Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

## Application for Authorisation/Renewal of Authorisation under Bio-Medical waste (management and handling) Rule, 1998

(To be submitted in triplicate to Sub-Regional Office/Regional Office/Head Office of the board)

**From:** Kiran Joshi

To :The Member secretary,  
Maharashtra Pollution Control Board  
Regional Office - Mumbai, Kalpataru Point, 3rd & 4th floor,  
Sion Matunga scheme, Road no. 8,  
Opp. Sion Circle, Mumbai - 400 022

### 1) Particulars of Applicant

**i) Name of Applicant(in block letters and in full)**

KIRAN JOSHI

**ii) Name of institution**

Office No.105-106, Vikas Paradise, LBS Marg, Opp HP Petrol Pump, Mulund (W), Mumbai - 400 080

**Address of institution**

Office No.105-106, Vikas Paradise, LBS Marg, Opp HP Petrol Pump, Mulund (W), Mumbai - 400 080

**Telephone**

8433724506

**Fax**

NA

**Email**

Sagar.saxena@nightingales.in

### 2) Activity for which authorization is sought

**i) Generation**

1

**ii) Collection**

1

**iii) Reception**

0

**iv) Storage**

0

**v) Transportation**

0

**vi) Treatment**

0

**vii) Disposal**

0

**viii) Any other form of handing**

Clinic

### 3) Please state whether applying for fresh authorization or for renewal

Fresh