

# MAHARASHTRA POLLUTION CONTROL BOARD

Ph.No. 2560139  
Fax No. 2560851  
E-mail:- sronagpur1@mpcb.gov.in

Sub-Regional Office-I,  
5<sup>th</sup> Floor, Udyog Bhawan,  
Civil Lines, Nagpur.

NO.MPC/SRN-I/SRO-NAGPUR I/BMW\_AUTH/2107000288

Date: - 15/07/2021

To,  
M/s. ANVIKA SONOGRAPHY CENTRE,  
C/O DR GOVIND BHUTADA HOSPITAL,  
MAIN ROAD KATOL,  
TAH KATOL DIST NAGPUR.

Sub: - Application for Combined consent & Bio-medical Waste Management Authorization.

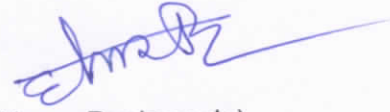
Ref: -Your application received to this office on 22/06/2021 MPCB-BMW\_AUTH-0000035433.

This office is in receipt of your online application for Bio-medical Waste. During scrutiny of your application it is observed that, document submitted by you are not proper & requires following information & documents.

- Water Budget is not provided suitably.
- Generation & quantity of BMW.
- BNH certificate.
- CBMWTSDF membership copy is not submitted.
- Authorisation fee is not deposited.

In view of above, it is not possible to process your application, hence your application is returned herewith for resubmission.

Operating Health Care Facility without valid Authorization/consent is violation of Bio Medical Waste Management rules 2016, Water (Prevention & control of pollution) Act 1974, Air (Prevention & control of pollution) Act 1981 & Hazardous waste (MH & TM) rules 1989 amended and may lead to stringent legal action including closure, please note.



(Hema Deshpande)  
Sub-Regional Officer-I,  
M. P. C. Board, Nagpur.