

MAHARASHTRA POLLUTION CONTROL BOARD
Regional Office Mumbai

Phone : 022-24016239

Fax : 022-24015269

Email : romumbai@mpcb.gov.in

Visit At : <http://mpcb.gov.in>



1st floor ,Kalpataru Point
Sion Circle,Sion (East),
Mumbai- 400 022

LETTER OF BIO-MEDICAL WASTE AUTHORISATION

[Authorisation for Generation, Collection, Reception, Segregation, Storage of Bio-Medical Wastes under Rule 10]

- I. File number of authorization and date of issue
ROMumbai /BMW-Auth/ 2105000572 *Date* 21/05/2021
- II. **M/s Arihant Heart Clinic and Nursing Home LLP** is hereby granted an Authorization for generation biomedical waste on the premises situated at, **A-Ground Floor, Lancelot CHS Ltd, Opp.Kalyan Jewellers,,S.V.Road ,Borivali (W) ,Mumbai-400092.**
- III. This authorization shall be in force for a period up to **30.04.2025** An application shall be made by the occupier/operator for renewal **3 Months** before expiry of earlier Authorization.
- IV. This authorization is issued subject to compliance of the conditions stated below and to such other conditions as may be specified in the Rules for the time being in force under the Environment (Protection) Act, 1986.
- V. No of Beds: **31 Nos.**

Terms and Conditions of authorization

1. The authorized Person shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorisation shall be produced for inspection at the request of an officer authorized by the prescribed authority.
3. i) The authorized person shall not rent, lend or sell the biomedical waste or facility.
ii) The authorized person can transfer the BMW generated at above premises to the "Transporter" or "Operator of Facility" authorized by MPCB under Bio-Medical Waste (Management and Handling) Rules, 2016 for collection, transportation, treatment and/or disposal of BMW generated.
4. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
5. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility.

UAN No00030809 Arihant Heart Clinic and Nursing Home LLP