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HINDUSTAN ZINC
Zinc & Silver of India

Ref. :HZL/RDM/ENV/2026-27/

Date 30.05.2026

Registered A/D

To,

Regional Officer,
Rajasthan State Pollution Control Board,
Old Excise office building, Kalalwati
Rajnagar, Rajsamand (Rajasthan)
PIN – 313324

Sub.: Annual Report regarding authorization under the Biomedical Waste (M&H) Rules, 2016 in **Form – IV** and **Form – I.**

Ref.: F(BMW)/Rajsamand(Railmagra)/17(1)/2017-2018/1460-1461 dated 03.03.2022

Sir,

Please find enclosed herewith Annual Report regarding Authorization under the Bio-Medical Waste (M&H) Rules 2016 in **Form-IV** and of accident reporting in **Form-I.**

Thanking you.

Yours faithfully,

(Dr. Suresh Meghwal)
CMO – Rajpura Dariba Complex

Dr. Suresh Meghwal
MBBS. MD. AFIH
Registration No. 26320 (RMC)
(Chief Medical Officer)
HZL Rajpura Dariba Complex
PO. DARIBA-313211 (Raj.)

CC:

1. Member Secretary
Rajasthan State Pollution Control Board,
4 – Institutional Area, Jhalana Doongri,
Jaipur-302004 (Raj)

2. Central Hospital, Dariba

3. Office Copy

Form - IV
(See rule 13)
ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

S.No.	Particulars		
	Particulars of the Occupier		
1	(i) Name of the authorised person (occupier or operator of facility)	:	**Debanshu Chatterjee** **Unit Head – Rajpura Dariba Mine** **PO – Dariba** **Rajsamand (Rajasthan)**
	(ii) Name of HCF or CBMWTF	:	**Zinc Hospital – Dariba** **PO – Dariba**
	(iii) Address for Correspondence	:	**Rajpura Dariba Mine** **PO – Dariba** **PIN - 313211**
	(iv) Address of Facility	:	**Rajpura Dariba Mine** **PO – Dariba** **PIN - 313211**
	(v)Tel. No, Fax. No	:	**Tel. – (02952) 265151** **Fax – (02952) 265143**
	(vi) E-mail ID	:	**Debanshu.Chatterjee@vedanta.co.in**
	(vii) URL of Website		**www.hzlindia.com**
	(viii) GPS coordinates of HCF or CBMWTF		**24°57'30.05"N** **74° 7'4.91"E**
	(ix) Ownership of HCF or CBMWTF	:	**Rajpura Dariba Mine, HZL**
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	**F(BMW)/Rajsamand(Railmagra)/17(1)/2017-2018/1460-1461 dated 03.03.2022** and valid up to **30.04.2027**
	(xi). Status of Consents under Water Act and Air Act	:	Under Water Act, **F(BMW)/Rajsamand(Railmagra)/17(1)/2017-2018/1334-1335 dated 16.02.2022** and valid up to **30.04.2027**
2	Type of Health Care Facility	:	**Hospital**
	(i) Bedded Hospital	:	**16 Beds**
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	**Not Applicable**
	(iii) License number and its date of expiry	:	**F(BMW)/Rajsamand(Railmagra)/17(1)/2017-2018/1460-1461 dated 03.03.2022** and valid up to **30.04.2027**
3	Details of CBMWTF		**Not Applicable**
	(i) Number healthcare facilities covered by CBMWTF	:	

	(ii) No of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	

CATEGORY	KG/YEAR	AVERAGE KG/MONTH
YELLOW	429.470	35.789
RED	700.451	58.371
BLUE	318.605	26.550
WHITE	16.730	01.394

5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on-site storage facility	:	Size: **20 KG/DAY** Capacity: **120 KGS** Provision of on-site storage: **Dedicated Storage**

Type of treatment	No of unit	Capacity (kg/day)	Quantity Treated or disposed in Kg/Annum
Incinerators	N/A	N/A	N/A
Plasma Pyrolysis	N/A	N/A	N/A
Autoclaves	N/A	N/A	N/A
Microwave	N/A	N/A	N/A
Hydroclave	N/A	N/A	N/A
Shredder	N/A	N/A	N/A
Needle tip cutter/ destroyer	2	23 gm/day	-
Sharps	N/A	N/A	N/A
Encapsulation or concrete pit	N/A	N/A	N/A
Deep Burial Pit	N/A	N/A	N/A
Chemical Disinfection	N/A	N/A	N/A
Any other treatment equipment	N/A	N/A	N/A

	(ii) Disposal Facility	:	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	**Not Applicable**
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	**Not Applicable**

	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		**Not Applicable**
	(vi) Name of the Common Biomedical Waste Treatment Facility Operator through which wastes are disposed of	:	**En-vision Enviro Engineers Pvt. Ltd, Plot No. – 5008 Village Umarda Udaipur(Rajasthan)**
	(vii) List of members HCF not handed over bio-medical waste.	:	**Not Applicable**
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	:	**Yes, Biomedical waste management committee exists**
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.	:	**16**
	(ii) number of personnel trained	:	**33**
	(iii) number of personnel trained at the time of induction	:	**33**
	(iv) number of personnel not undergone any training so far	:	**0**
	(v) whether standard manual for training is available?	:	**Yes, Standard manual for training is available.**
	(vi) any other information)	:	
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred	:	**Nil**
	(ii) Number of the persons affected	:	**Nil**
	(iii) Remedial Action taken (Please attach details if any)	:	**Nil**
	(iv) Any Fatality occurred, details.	:	**Nil**
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	:	**Not Applicable**
	Details of Continuous online emission monitoring systems installed		**Not Applicable**

10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	:	**Standards are met. Monitoring is carried out.**
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	:	**Standards are met.**
12	Any other relevant information	:	**Nil**

Certified that the above report is for the period from **Jan 2025 to Dec 2025.**

Date: **30.05.2026**
Place: **Dariba**

(Dr. SureshMeghwal)
CMO – Rajpura Dariba Complex

Dr. Suresh Chandra
MBBS. MD. AFIH
Registration No. 26320 (RMC)
(Chief Medical Officer)
HZL Rajpura Dariba Complex
Po. DARIBA-313211 (Raj.)

FORM – I

[(See rule 4(o), 5(i) and 15 (2)]

ACCIDENT REPORTING

1. Date and time of accident: **N/A**
2. Type of Accident: **N/A**
3. Sequence of events leading to accident: **N/A**
4. Has the Authority been informed immediately: **N/A**
5. The type of waste involved in accident: **N/A**
6. Assessment of the effects of the accidents on human health and the environment: **N/A**
7. Emergency measures taken: **N/A**
8. Steps taken to alleviate the effects of accidents: **N/A**
9. Steps taken to prevent the recurrence of such an accident: **N/A**
10. Does your facility have an Emergency Control policy? If yes give details: **Emergency Response and Contingency Plan is available.**

Date: **30.05.2026**
Place: **Dariba**

(Dr. Suresh Meghwal)
CMO – Rajpura Dariba Complex

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