

Letter To GPCB for annual report 2025

Date: 03Mar26

BMW ID: 407435

QEE ID: 3650

To,

Regional Officer.

Gujarat pollution control Board

Geri Compound; Racecourse Road.

Race course; Vadodara.

Subject: Annual report submission for QEE ID No. 3650

Respected Sir/Madam,

We at Cliantha Research Limited, with **BMW ID No. 407435** ; **QEE ID No : 3650** would hereby like to submit the annual BMW report for the year 2025.

Please receive the same.

Regards ;

  
Mr. Snehal Parekh

Cliantha Research Limited

Vadodara

8.8/12/25  
31/3/25  
G. P. C. Board  
GERI Compound  
Race Course, Vadodara.

Enclosed: Quantum enrollment certificate

# Form - IV (See rule 13) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)]

| Sl. No. | Particulars                                                                                             |   |                                                                                           |
|---------|---------------------------------------------------------------------------------------------------------|---|-------------------------------------------------------------------------------------------|
| 1.      | Particulars of the Occupier                                                                             | : |                                                                                           |
|         | (i) Name of the authorised person (occupier or operator of facility)                                    | : | Mr. Snehal Parekh                                                                         |
|         | (ii) Name of HCF or CBMWTF                                                                              | : | Cliantha Research Ltd                                                                     |
|         | (iii) Address for Correspondence                                                                        | : | NR. DELHI PUBLIC SCHOOL, OPP. MAYFAIR ATRIUM, VADSAR - KALALI RING ROAD, VADODARA         |
|         | (iv) Address of Facility                                                                                | : | Quantum environment engineers; 467/1, Near sewage treatment plant, Ataladara, Vadodara-11 |
|         | (v) Tel. No, Fax. No                                                                                    | : | 9825804838                                                                                |
|         | (vi) E-mail ID                                                                                          | : | engineeringvad@cliantha.com                                                               |
|         | (vii) URL of Website                                                                                    | : |                                                                                           |
|         | (viii) GPS coordinates of HCF or CBMWTF                                                                 | : |                                                                                           |
|         | (ix) Ownership of HCF or CBMWTF                                                                         | : | Private                                                                                   |
|         | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules                | : | BMW AUTH NO :BMW-367735, VALID UPTO : 26/11/2028                                          |
|         | (xi). Status of Consents under Water Act and Air Act                                                    | : | Valid up to:26/11/2028                                                                    |
| 2.      | Type of Health Care Facility                                                                            | : |                                                                                           |
|         | (i) Bedded Hospital                                                                                     | : | No. of Beds:.....253                                                                      |
|         | (ii) Non-bedded hospital                                                                                | : | Clinical Research                                                                         |
|         | (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : |                                                                                           |
|         | (iii) License number and its date of expiry                                                             | : | BMW ID : 407435 Valid Upto : 26/11/2028                                                   |
| 3.      | Details of CBMWTF                                                                                       | : |                                                                                           |
|         | (i) Number healthcare facilities covered by CBMWTF                                                      | : |                                                                                           |
|         | (ii) No of beds covered by CBMWTF                                                                       | : |                                                                                           |
|         | (iii) Installed treatment and disposal capacity of CBMWTF:                                              | : | _____ Kg per day                                                                          |
|         | (iv) Quantity of biomedical waste treated or disposed by CBMWTF                                         | : | _____ Kg/day                                                                              |



| 4.                                   | Quantity of waste generated or disposed in Kg per annum (on monthly average basis)                                   | :               | Yellow Category :23.05 kgs<br>Red Category :874.96 kgs<br>White: 8.81 kgs<br>Blue Category :2.7 kgs<br>General Solid waste:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------|-----------------|----------------------------------------------|--------------|--|--|--|------------------|--|--|--|------------|--|--|--|-----------|--|--|--|------------|--|--|--|----------|--|--|--|--------------------------------|--|--|---|--------------------------------------|--|--|---|-------------------|--|--|--|------------------------|--|--|---|--------------------------------|--|--|--|
| 5.                                   | Details of the Storage, treatment, transportation, processing and Disposal Facility                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
|                                      | (i) Details of the on-site storage facility                                                                          | :               | Size : NA<br>Capacity :<br>Provision of : (cold storage or any other provision)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
|                                      | disposal facilities                                                                                                  |                 | <table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr><td>Incinerators</td><td></td><td></td><td></td></tr> <tr><td>Plasma Pyrolysis</td><td></td><td></td><td></td></tr> <tr><td>Autoclaves</td><td></td><td></td><td></td></tr> <tr><td>Microwave</td><td></td><td></td><td></td></tr> <tr><td>Hydroclave</td><td></td><td></td><td></td></tr> <tr><td>Shredder</td><td></td><td></td><td></td></tr> <tr><td>Needle tip container destroyer</td><td></td><td></td><td>-</td></tr> <tr><td>Sharps encapsulation or concrete pit</td><td></td><td></td><td>-</td></tr> <tr><td>Deep burial pits:</td><td></td><td></td><td></td></tr> <tr><td>Chemical disinfection:</td><td></td><td></td><td>-</td></tr> <tr><td>Any other treatment equipment:</td><td></td><td></td><td></td></tr> </tbody> </table> | Type of treatment equipment | No of units | Capacity Kg/day | Quantity treated or disposed in kg per annum | Incinerators |  |  |  | Plasma Pyrolysis |  |  |  | Autoclaves |  |  |  | Microwave |  |  |  | Hydroclave |  |  |  | Shredder |  |  |  | Needle tip container destroyer |  |  | - | Sharps encapsulation or concrete pit |  |  | - | Deep burial pits: |  |  |  | Chemical disinfection: |  |  | - | Any other treatment equipment: |  |  |  |
| Type of treatment equipment          | No of units                                                                                                          | Capacity Kg/day | Quantity treated or disposed in kg per annum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Incinerators                         |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Plasma Pyrolysis                     |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Autoclaves                           |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Microwave                            |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Hydroclave                           |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Shredder                             |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Needle tip container destroyer       |                                                                                                                      |                 | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Sharps encapsulation or concrete pit |                                                                                                                      |                 | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Deep burial pits:                    |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Chemical disinfection:               |                                                                                                                      |                 | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
| Any other treatment equipment:       |                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
|                                      | (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.                    | :               | Red Category (like plastic, glass etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
|                                      | (iv) No of vehicles used for collection and transportation of biomedical waste                                       | :               | .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
|                                      | (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum |                 | NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |
|                                      | (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of           | :               | Quantum environment engineers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                             |             |                 |                                              |              |  |  |  |                  |  |  |  |            |  |  |  |           |  |  |  |            |  |  |  |          |  |  |  |                                |  |  |   |                                      |  |  |   |                   |  |  |  |                        |  |  |   |                                |  |  |  |

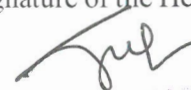


|    |                                                                                                                                   |   |                                                               |
|----|-----------------------------------------------------------------------------------------------------------------------------------|---|---------------------------------------------------------------|
|    | (vii) List of member HCF not handed over bio-medical waste.                                                                       |   |                                                               |
| 6  | Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period       |   |                                                               |
|    | Details trainings conducted on BMW                                                                                                |   |                                                               |
| 7  | (i) Number of trainings conducted on BMW Management.                                                                              |   | .....                                                         |
|    | (ii) number of personnel trained                                                                                                  |   | .....                                                         |
|    | (iii) number of personnel trained at the time of induction                                                                        |   | .....                                                         |
|    | (iv) number of personnel not undergone any training so far                                                                        |   | .....                                                         |
|    | (v) whether standard manual for training is available?                                                                            |   | Yes                                                           |
|    | (vi) any other information)                                                                                                       |   | NA                                                            |
| 8  | Details of the accident occurred during the year                                                                                  |   | .....                                                         |
|    | (i) Number of Accidents occurred                                                                                                  |   | .....                                                         |
|    | (ii) Number of the persons affected                                                                                               |   | .....                                                         |
|    | (iii) Remedial Action taken (Please attach details if any)                                                                        |   | NA                                                            |
|    | (iv) Any Fatality occurred, details.                                                                                              |   | NA                                                            |
| 9. | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?     |   | .....                                                         |
|    | Details of Continuous online emission monitoring systems installed                                                                |   | NA                                                            |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?                   |   | .....                                                         |
| 11 | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? |   | .....                                                         |
| 12 | Any other relevant information                                                                                                    | : | (Air Pollution Control Devices attached with the Incinerator) |

Certified that the above report is for the period from  
.....Jan2025 to Dec2025.....

Name and Signature of the Head of the Institution

Date: 03 Mar 26  
Place: Vadodera.

  
QUANTHA RESEARCH LIMITED  
'DREAM ARCADE'  
Nr. Delhi Public School,  
Opp. Mayfair Apartment,  
Vadisar - Kaloli Ring Road,  
Vadodara - 390 012, Gujarat, India

IMA VADODARA BMWMC IN ASSOCIATION WITH



**QUANTUM**  
environment engineers

GPCB AUTHORISED COMMON BIOMEDICAL WASTE TREATMENT FACILITY

## Enrollment Certificate

This is to certify that

Dr. / In-charge

: **Mr. Snehal Parekh**

HCF Name

: **Cliantha Research Limited**

Located at the address

: **Dream Arcadia, Opp mayfair Atrium, Vadsar-kalali Ring Road**

City/Village/Area

: **Kalali**

Dist.: **Vadodara**

Pincode: **390012**

Is enrolled as a member for Biomedical Waste Management at our GPCB authorised Common Biomedical Waste Treatment Facility(CBWTF). They have agreed to provide BMW generated at their unit to our CBWTF as per BMW Management Rules 2016 and amendments thereto and pay charges for the same as per the agreed contract.

| <u>OFF ID</u> | <u>Valid Upto:</u> | <u>No. of Beds</u> | <u>(GPCB) BMW - ID</u> |
|---------------|--------------------|--------------------|------------------------|
| <b>3650</b>   | <b>31-03-2028</b>  | <b>253</b>         | <b>407435</b>          |

Place : **Vadodara**

Issued on : **01-April-2024**

QUANTUM ENVIRONMENT ENGINEERS



AUTHORISED SIGNATURE

Plot No.: 467/1, VMC Sewage Treatment Plant Campus, Mujmahuda, Vadodara - 390 020.

**Cliantha Research Ltd - Baroda****Total BMW Data Monthwise 2025**

| Month          | Yellow       | Red            | Blue        | White        | Total          |
|----------------|--------------|----------------|-------------|--------------|----------------|
| Jan-25         | 25.4         | 912            | 5.7         | 7.8          | 950.9          |
| Feb-25         | 24.7         | 719            | 0           | 6.6          | 750.3          |
| Mar-25         | 15.3         | 751            | 0           | 8.4          | 774.7          |
| Apr-25         | 19           | 1035           | 3.1         | 9.2          | 1066.3         |
| May-25         | 31.5         | 1214           | 2           | 11.9         | 1259.4         |
| Jun-25         | 23           | 938.3          | 3.2         | 9.9          | 974.4          |
| Jul-25         | 23.4         | 991            | 2.3         | 9.3          | 1026           |
| Aug-25         | 28.1         | 1024           | 4.2         | 9.4          | 1065.7         |
| Sep-25         | 20.4         | 859.3          | 4.5         | 9.9          | 894.1          |
| Oct-25         | 32.9         | 621            | 0           | 7.5          | 661.4          |
| Nov-25         | 12           | 709            | 5.6         | 8.2          | 734.8          |
| Dec-25         | 21           | 726            | 1.8         | 7.7          | 756.5          |
| <b>Total :</b> | <b>276.7</b> | <b>10499.6</b> | <b>32.4</b> | <b>105.8</b> | <b>10914.5</b> |