



07<sup>th</sup> January 2021

To,  
M. P. Pollution Control Board,  
Deendayal Nagar  
Gwalior (M.P)

**Sub: - Submission of Form -11 Bio Medical Hazard wastage rules 1998.**

Dear Sir,

Please find enclosed here with Annual Return of **Form 11** under Bio Medical Hazard Wastage rules 1998.

Thanking you,

Kindly Acknowledge the same

**For AKZONOBEL INDIA LIMITED**

  
**Prakash Nayaya Salian**  
**(Factory Manager)**



# FORM 11

(See rule 10)  
ANNUAL REPORT

(To be submitted to the prescribed authority by 31 January every year).

## 1. Particulars of the applicant:

- (i) Name of the authorized person (occupier/operator): **Mr. Rajeev RajGopal**  
(ii) Name of the institution: **AKZONOBEL INDIA LTD**

Address: Plot No.GAE-1(Part), GAF-1&GAF-2, Ghirongi Industrial Area, Malanpur-Distt. Bhind Madhya Pradesh-477117

Tel. No- 07539-283101.

Fax No- NIL

2. Categories of waste generated and quantity on a monthly average basis: **NIL**

3. Brief details of the treatment facility:

In case of off-site facility: **OHC**

(i) Name of the operator: **MALE NURSE**

(ii) Name and address of the facility: **Maheshwari Nursing Home**

Tel. No.....

Fax No.....

4. Category-wise quantity of waste treated: **NIL**

5. Mode of treatment with details: **NIL**

6. Any other information: **NIL**

7. Certified that the above report is for the period from.....**JAN TO DEC 2020.**

Date...**4<sup>th</sup> JAN 2021**.....

Place...**BHIND**.....

Authorized Signatory.....

