

Authorization under Bio-Medical Waste Management (Management and Handling) Rules, 2016

1.	Name of Approval/ NoC / License/ Registration	Authorization under Bio-Medical Waste Management (Management and Handling) Rules, 2016
2.	Competent Authority	PCC, DNH & DD
3.	Applicability Criteria	These rules shall apply to all persons who generate, collect, receive, store, transport, treat, dispose, or handle biomedical waste in any form including hospitals, nursing homes, clinics, dispensaries, veterinary institutions, animal houses, pathological laboratories, blood banks, ayush hospitals, clinical establishments, research or educational institutions, health camps, medical or surgical camps, vaccination camps, blood donation camps, first aid rooms of schools, forensic laboratories and research labs.
4.	Stage	Pre Operation & During Operation
5.	Timelines	90 days
6.	Documents Required	<p>FORM - II APPLICATION FOR AUTHORISATION OR RENEWAL OF AUTHORISATION</p> <ul style="list-style-type: none"> • Name of the Applicant • Name of the health care facility (HCF) or common bio-medical waste treatment facility (CBWTF) • Address for correspondence • Tele No., Fax No • Email • Website Address
7.	Procedure for getting License	<p style="text-align: center;">○</p> <ul style="list-style-type: none"> • Form-II : Application for Authorization or Renewal of Authorization • Valid membership of CBWTF for treatment of Bio Medical Waste. • Paid for authorization fees as per PCC notification dated 18/12/2021

		<ul style="list-style-type: none"> • Bio medical waste categorization as per the schedule – I of the Bio Medical Waste Management Rules, 2016 along with per day generation as prescribed in Form – II. • Previously issued Bio medical Waste Authorization by Pollution Control Committee, DNH & DD. (renewal, if applicable) • Form-IV [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)] (renewal, if applicable) 															
8.	Fee & Mode of Payment	<p>Granting Authorization under biomedical Waste Management Rule, 2016.</p> <table border="1" data-bbox="469 873 1416 1356"> <thead> <tr> <th data-bbox="469 873 781 911">Sr. No</th> <th data-bbox="781 873 1101 911">Conditions</th> <th data-bbox="1101 873 1416 911">Fees (In Rs.)</th> </tr> </thead> <tbody> <tr> <td data-bbox="469 911 781 989">1.</td> <td data-bbox="781 911 1101 989">Clinics/ Dispensaries without beds</td> <td data-bbox="1101 911 1416 989">1,000</td> </tr> <tr> <td data-bbox="469 989 781 1100">2.</td> <td data-bbox="781 989 1101 1100">Healthcare facilities having less than 50 beds</td> <td data-bbox="1101 989 1416 1100">3,000</td> </tr> <tr> <td data-bbox="469 1100 781 1247">3.</td> <td data-bbox="781 1100 1101 1247">Healthcare facilities having more than 50beds but more than 200beds</td> <td data-bbox="1101 1100 1416 1247">5,000</td> </tr> <tr> <td data-bbox="469 1247 781 1356">4.</td> <td data-bbox="781 1247 1101 1356">Healthcare facilities having more than 200 bed</td> <td data-bbox="1101 1247 1416 1356">10,000</td> </tr> </tbody> </table>	Sr. No	Conditions	Fees (In Rs.)	1.	Clinics/ Dispensaries without beds	1,000	2.	Healthcare facilities having less than 50 beds	3,000	3.	Healthcare facilities having more than 50beds but more than 200beds	5,000	4.	Healthcare facilities having more than 200 bed	10,000
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