

CELARA DIAGNOSTICS PRIVATE LIMITED

Old No. 38/B, New No.24, South End Road, Yediyur Bangalore – 560004

COI No: U85320KA2017PTC103452, E-Mail: krishnabmma@gmail.com, Ph. No.: 9886829797

To

Regional Office: Bengaluru City-South
Nisarga Bhavan, 1st Floor, 7th D Main Road,
Opp.Pushapanjali Theatre,
Shivanahalli, Timmaiah Main Road,
Bengaluru - 560010

Respected Sir/Madam,

Subject: - Submission of Form IV Annual Report (CBWTF).

Calendar Year:- 2024.

Authorization No: 176/KSPCB/RO:B.C.South/BMW/EO/DEO/AEO/2017-18/949.

With reference to the above subject, we have enclosed herewith the Form IV Annual Report (CBWTF) for the calendar year 2024.

Should the Learned Officer require any further information, we shall provide for the same.

Thanking You

Yours truly,

For Celara Diagnostics Private Limited


Authorized Signatory



Place: Bangalore

Date: January 17, 2025



Form – IV
(See rule13)
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)]

Sl. No	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or : operator of facility)	:	Prakash M S
	(ii) Name of HCF or CBMWTF	:	Celara Diagnostics Pvt Ltd
	(iii) Address for Correspondence	:	Old No:38/B, New no.24, Southend Road, Yediyur, Bangalore-560004
	(iv) Address of Facility		Same as above
	(v)Tel. No, Fax. No	:	080-46677111
	(vi) E-mail ID	:	reachus@mycelara.com
	(vii) URL of Website		www.myclara.com
	(viii) GPS coordinates of HCF or CBMWTF		12.936465 N 77.576203 E
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation KSPCB/RO:B.C No.: 2017-18/949 8/09/2017 valid up to NA
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: NA
2.	Type of Health Care Facility	:	Clinical Laboratory
	(i) Bedded Hospital	:	No. of Beds:NA
	(ii) Non-bedded hospital	:	NA

	Laborator (Clinic or Blood Bank or Clinical y or Research Institute or Veterinary Hospital or any other)		Clinical Laboratory
	(iii) License number and its date of expiry		
3.	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day NA
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day NA
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category 509.59 Red Category : 2057.38 White: 23.3 Blue Category : 91.94 General Solid waste: NA
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on- site storage facility	:	Size : NA Capacity : NA Provision of on-site storage : (cold storage or any other provision)

	disposal facilities		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 cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits: Chemical disinfection: Any other treatment equipment:		NA - - -	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)			NA
	(iv) No of vehicles used for collection and transportation of biomedical waste	:				NA
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Incineration Ash ETP Sludge	Quantity generated		Where disposed NA
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of					Mardi Bio Industries Pvt Ltd
	(vii) List of member HCF not handed over bio-medical waste.					NA
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period					
7	Details trainings conducted on BMW					
	(i) Number of trainings conducted on BMW Management.					Two

	(ii) number of personnel trained		18
	(iii) number of personnel trained at the time of induction		NA
	(iv) number of personnel not undergone any training so far		NIL
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		NA
8	Details of the accident occurred during the year		NA
	(i) Number of Accidents occurred		NA
	(ii) Number of the persons affected		NA
	(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?		NA
	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?		NA
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)


Certified that the above report is for the period from January 2024 to December 2024

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Name and Signature of the Head of the Institution

Date:10/01/2025
Place: Bangalore

For CELARA DIAGNOSTICS PRIVATE LIMITED


Authorized Signatory



MARIDI

BIO INDUSTRIES PVT. LTD

(Bio Medical Waste Management & Handling Services)

CIN : U90001TG2011PTC072453

CERTIFICATE OF TREATMENT

Date: 07.01.2025

To,
CELARA DIAGNOSTICS PVT LTD-YEDIYUR,
Old No38/B, New No 24, South End Road, Yedyur,
Bengaluru-560004.

Dear Sir/Madam,

This is to inform you that we have collected following quantity of Bio medical waste from your Center and the same has been treated and disposed as per K.S.P.C.B guidelines.

Average waste collected from your Center for the month of 01.01.2024 to 31.12.2024.

Sl.no	Month	Yellow	Red	Blue	White	Cytotoxic	Covid	Total
		Quantity in kg						
1	Jan 2024	19.47	187.85	0.00	0.00	0.00	0.00	207.32
2	Feb 2024	31.80	186.34	6.60	0.00	0.00	0.00	224.74
3	Mar 2024	27.40	159.40	9.40	0.00	0.00	0.00	196.20
4	Apr 2024	30.60	108.60	2.50	0.00	0.00	0.00	141.70
5	May 2024	56.24	111.78	4.64	1.10	0.00	0.00	173.76
6	Jun 2024	26.30	148.90	6.60	1.00	0.00	0.00	182.80
7	Jul 2024	63.50	188.90	8.60	2.00	0.00	0.00	263.00
8	Aug 2024	59.30	185.20	20.70	1.50	0.00	0.00	266.70
9	Sep 2024	38.90	167.80	4.20	2.50	0.00	0.00	213.40
10	Oct 2024	69.50	239.10	10.10	4.60	0.00	0.00	323.30
11	Nov 2024	38.88	196.11	9.90	3.80	0.00	0.00	248.69
12	Dec 2024	47.70	177.40	8.70	6.80	0.00	0.00	240.60
Total		509.59	2057.38	91.94	23.3	0	0	2682.21

This for your information


Prepared by


Verified by


Authorised by

Plant : Sy. No : 1/37 & 1/38, 35th Milestone, Harohalli Hobli, Gabbadi Kaval, Kanakapura Road, Ramanagar Dist-562 112.

Regional Office : No. : 8, **Sunaga Arcade**, 4th Floor, 1st Main, 8th Cross, Sampangiramanagar, Bangalore - 560 027.

Ph. : +91-80-4151 2958, Fax : +91-80-2210 3270.

E-mail : maridibmw@maridibio.com website : www.maridibio.com

CELARA DIAGNOSTICS PRIVATE LIMITED

No.28 and 28/1, Ground Floor and 1st Floor, Infantry Road, Bangalore - 560001

COI No: U85320KA2017PTC103452, E-Mail: krishnabmma@gmail.com, Ph. No.: 9886829797

To

Regional Office: Bengaluru City-East
Nisarga Bhavan, 3rd Floor, 7th D Main Road,
Opp.Pushapanjali Theatre,
Shivanahalli, Timmaiah Main Road,
Bengaluru - 560010

Respected Sir/Madam,

Subject: Submission of Form IV Annual Report (CBWTF).

Calendar Year: 2024.

Authorization No: PCB/BCE/BMW/1352/R.No.182038/2021-22/527.

With reference to the above subject, we have enclosed herewith the Form IV Annual Report (CBWTF) for the calendar year 2024.

Should the Learned Officer require any further information, we shall provide for the same.

Thanking You

Yours truly,

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Authorized Signatory



Place: Bangalore

Date: January 17, 2025



Form – IV
(See rule13)
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)]

Sl. No	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or : operator of facility)	:	Prakash M S
	(ii) Name of HCF or CBMWTF	:	Celara Diagnostics Pvt Ltd
	(iii) Address for Correspondence	:	28 & 28/1, Infantry Road Bangalore-560001
	(iv) Address of Facility		Same as above
	(v) Tel. No, Fax. No	:	080-46677666
	(vi) E-mail ID	:	connect@mycelara.com
	(vii) URL of Website		www.myclara.com
	(viii) GPS coordinates of HCF or CBMWTF		12.5851.9 N 77.36070 E
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation:PCB/BCE/BMW/1352No.: R No:182038/2021-22/527 4/08/2021 valid up to NA
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: NA
2.	Type of Health Care Facility	:	Clinical Laboratory
	(i) Bedded Hospital	:	No. of Beds:NA
	(ii) Non-bedded hospital	:	NA

	Laborator (Clinic or Blood Bank or Clinical y or Research Institute or Veterinary Hospital or any other)		Clinical Laboratory
	(iii) License number and its date of expiry		
3.	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day NA
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day NA
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category 58.69 Red Category : 249.65 White: 57.3 Blue Category : NA General Solid waste: NA
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on- site storage facility	:	Size : NA Capacity : NA Provision of on-site storage : (cold storage or any other provision)

	disposal facilities		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 cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits: Chemical disinfection: Any other treatment equipment:		NA - - -	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)			NA
	(iv) No of vehicles used for collection and transportation of biomedical waste	:				NA
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum			Quantity generated		Where disposed
			Incineration Ash ETP Sludge		NA	
	(vi) Name of the Common Bio- : Medical Waste Treatment Facility Operator through which wastes are disposed of					Medicare Environmental Management Pvt Ltd
	(vii) List of member HCF not handed over bio-medical waste.					NA
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period					
7	Details trainings conducted on BMW					
	(i) Number of trainings conducted on BMW Management.					One

	(ii) number of personnel trained		18
	(iii) number of personnel trained at the time of induction		NA
	(iv) number of personnel not undergone any training so far		NIL
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		NA
8	Details of the accident occurred during the year		NA
	(i) Number of Accidents occurred		NA
	(ii) Number of the persons affected		NA
	(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?		NA
	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?		NA
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)


Certified that the above report is for the period from January 2024 to December 2024

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Name and Signature of the Head of the Institution

Date:10/01/2025
Place: Bangalore

For CELARA DIAGNOSTICS PRIVATE LIMITED


Authorized Signatory

Collection Report

Hospital : Celara Diagnostics Pvt Ltd

Period : 2024

Hospital Id 46101278	Hospital No 7527	Sap Id 1102012	Vehicle Route 10 (Blr)	Bed Capacity 0	Town Bengaluru
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Sl. No	Month	Yellow Bags		Red Bags		Blue Mark Box		Whites		Cytotoxic Bags		Covid Yellow Bags		Total	
		Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight

1	Jan 2024	4.0	4.10	19.0	29.90	0.0	0.00	2.0	4.70	0.0	0.00	0.0	0.00	25.0	38.70
2	Feb 2024	8.0	6.30	17.0	26.70	0.0	0.00	3.0	9.40	0.0	0.00	0.0	0.00	28.0	42.40
3	Mar 2024	8.0	5.40	16.0	17.45	0.0	0.00	2.0	5.60	0.0	0.00	0.0	0.00	26.0	28.45
4	Apr 2024	8.0	5.60	14.0	18.50	0.0	0.00	1.0	3.60	0.0	0.00	0.0	0.00	23.0	27.70
5	May 2024	4.0	2.20	14.0	19.60	0.0	0.00	3.0	6.00	0.0	0.00	0.0	0.00	21.0	27.80
6	Jun 2024	6.0	5.00	13.0	20.20	0.0	0.00	2.0	6.50	0.0	0.00	0.0	0.00	21.0	31.70
7	Jul 2024	10.0	8.79	16.0	24.30	0.0	0.00	1.0	3.50	0.0	0.00	0.0	0.00	27.0	36.59
8	Aug 2024	3.0	2.10	7.0	23.30	0.0	0.00	1.0	3.80	0.0	0.00	0.0	0.00	11.0	29.20
9	Sep 2024	6.0	6.20	11.0	19.20	0.0	0.00	1.0	2.50	0.0	0.00	0.0	0.00	18.0	27.90
10	Oct 2024	4.0	2.00	6.0	11.50	0.0	0.00	1.0	2.00	0.0	0.00	0.0	0.00	11.0	15.50
11	Nov 2024	4.0	4.70	9.0	20.70	0.0	0.00	2.0	5.50	0.0	0.00	0.0	0.00	15.0	30.90
12	Dec 2024	8.0	6.30	13.0	18.30	0.0	0.00	1.0	4.20	0.0	0.00	0.0	0.00	22.0	28.80
Total		73.0	58.69	155.0	249.65	0.0	0.00	20.0	57.30	0.0	0.00	0.0	0.00	248.0	365.64