FORM - 4

[See rule 9(2)]

Format for Filling Returns Regarding Handling of Hazardous Waste [(To be submitted to the State Pollution Control Board / Committee by 31st January of every year]

Name and address of the Occupier / Operator of Facility
 Categories of wastes generated and quantity (in metric tones)
 Details of waste treatment operations
 Details of waste disposal operations

Sl. No.	Description of Hazardous Waste								
	Date of issuance of authorisation for the disposal of hazardous waste and its reference number	Physical form and contents	Chemical form	Total volume of the hazardous waste disposed with No. of packages	Mode of transportation to the site of disposal	Site of disposal [attach a sketch showing the location(s) of disposal]	Brief description of the method of disposal	Date of disposal	Remarks (if any)
1	2	3	4	5	6	7	8	9	10

5. Details of Environmental Surveillance:

Date of other	Analysis of ground water samples			Analysis of soil samples			Analysis of air sampling		Analysis
Measurement details	Location of sampling	Depth of sampling	Data	Location of sampling	Depth of sampling	Data	Location of sampling	Data	of samples (give)

Place	:	Signature	:
Date	:		