

FORM – 4

[See rules 5(6) and 22(2)]

FORM FOR FILING ANNUAL RETURNS BY THE OCCUPIER OR OPERATOR OF A FACILITY

[To be submitted by occupier/operator of disposal facility to State Pollution Control Board/ Pollution Control Committee by 30th June of every year for the preceding period April 20..... to March 20.....]

1.	Name and address of the generator/operator of facility	:					
2.	Name of the authorized person and full address with telephone and fax number	:					
3.	Description of hazardous waste	:	Physical form with description		Chemical form		
4.	Consented quantity of product/others	:					
5.	Manufactured quantity of product/others	:					
6.	Quantity of hazardous wastes (in MTA) Note: If the space is not sufficient enclose annexure →	:	Type of hazardous waste as per Authorization		Quantity (in KL or MT)		
					Authorized	Generated	
			(a)				
			(b)				
			(c)				
			(d)				
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7.	Description of Storage	:					
8.	Description of Treatment	:					
9.	Details of transportation	:	Name & address of consignee	Mode of packing	Mode of transportation	Transportation	
						Date	Quantity
10.	Details of disposal of hazardous waste	:	Name & address of consignee	Mode of packing	Mode of transportation	Transportation	
						Date	Quantity
11.	Quantity of useful materials sent back to the manufacturers* and others#	:	Name and Type of material sent back to Manufacturers* and Others#		Quantity in Tones/KL		

* delete whichever is not applicable # enclose list of other agencies

Note: The Quantity shall be match with Form-5, Environmental Audit

Date: **Signature :**.....

Place: **Designation:**.....