

## ANNEXURE-II

### BIO-MEDICAL WASTE AUTHORIZATION FEE

SR. NO.	TYPE OF OCCUPIER OF AN INSTITUTION/OPERATOR OF BIO-MEDICAL WASTE FACILITY	FEE PER ANNUM (IN RS.)
<b>1.</b>	<b>TYPE OF OCCUPIER OF AN INSTITUTION HOSPITAL/NURSING HOME:</b>	
	a) WITH LESS THAN 50 BEDS	500
	b) WITH 50 BEDS AND ABOVE BUT LESS THAN 200 BEDS	3,000
	c) WITH 200 BEDS AND ABOVE BUT LESS THAN 500 BEDS	5,000
	d) WITH 500 BEDS AND ABOVE	10,000
<b>2.</b>	<b>GOVERNMENT DISPENSARIES</b>	250
<b>3.</b>	<b>PRIVATE CLINICS</b>	250
<b>4.</b>	<b>BLOOD BANKS, VETERINARY INSTITUTIONS, RESEARCH &amp; PATHOLOGICAL LABORATORIES:</b>	
	a) NUMBER OF PATIENTS OR SAMPLES UPTO 5,000 IN A YEAR	500
	b) NUMBER OF PATIENTS OR SAMPLES UPTO 10,000 IN A YEAR	1,000
	c) NUMBER OF PATIENTS OR SAMPLES UPTO 20,000 IN A YEAR	2,000
	d) NUMBER OF PATIENTS OR SAMPLES MORE THAN 20,000 IN A YEAR	4,000
<b>5.</b>	<b>SLAUGHTER HOUSES</b>	
	a) NUMBER OF ANIMALS SLAUGHTERED UPTO 5,000 IN A YEAR	500
	b) NUMBER OF ANIMALS SLAUGHTERED UPTO 10,000 IN A YEAR	1,000
	c) NUMBER OF ANIMALS SLAUGHTERED UPTO 20,000 IN A YEAR	2,000
	d) NUMBER OF ANIMALS SLAUGHTERED MORE THAN 20,000 IN A YEAR	4,000

NOTE: INSTITUTIONS MENTIONED AT SERIAL NUMBER 2, 3 AND PATHOLOGICAL LABORATORIES, BLOOD BANKS MENTIONED AT SERIAL NUMBER 4 SHALL BE EXEMPTED

FROM TAKING AUTHORIZATION IF THE NUMBER OF PATIENTS/SAMPLES ARE LESS THAN  
1,000 PER MONTH.