

VIJAYA INSTITUTE OF PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU, VIJAYAWADA – 21108

Date: 22.01.2022

CIRCULAR

All of the female staff members have been instructed to educate the students on the proper usage of sanitary napkins and how to properly dispose of used napkins in the incinerator located in the girls' restrooms.



Principal
VIJAYA INSTITUTE OF
PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU, VIJAYAWADA
PIN - 521 108

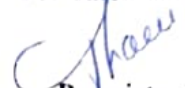


D.No.29-3-14, VENKATESWARA RAO STREET
GOVERNORPET, VIJAYAWADA - 520 002
PHONES: 2433355, 9848123355

Date: 09-02-2021

Received a Sum of Rs-3000 /- (Rupees Three Thousand Only) **Vijaya Institute of Pharmaceutical Sciences for Women, Enikepadu, Vijayawada, Krishna Dt** towards for Collection, Transportation and Disposal of Bio-medical Waste on continuous basis.

For Safenviron


Proprietor



D.No.29-3-14, VENKATESWARA RAO STREET
GOVERNORPET, VIJAYAWADA - 520 002
PHONES: 2433355, 9848123355

Date: 09-02-2021

Received a Sum of Rs.500/- (Rupees Five Hundred Only) **Vijaya Institute of Pharmaceutical Sciences for Women, Enikepadu, Vijayawada, Krishna Dt** Towards Enrollment fee.

For Safenviron


Proprietor

ENROLMENT FORM

To

Date: 8-2-2021

M/s. **SAFENVIRON UNIT II**

#29-3-14

Venkateswara Rao Street

Governor pet

Vijayawada – 520 002

Gentlemen:

1. We wish to enroll our Hospital as a member in the Bio-Medical Waste Treatment Facility of M/s. **SAFENVIRON UNIT II** as per the norms prescribed by A.P. Pollution Control Board

2. The details of our Hospital are as given below:

Name & Address of the Hospital :

VIJAYA INSTITUTE OF
PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU, VIJAYAWADA
PIN 521 108

Telephone no.

: 800 8651333

Fax / e - mail

: vijaya pharmacyfw@gmail.com

No. of Beds

:

Name of the Authorized Person

: Dr. K. Padmalatha

Designation

: Principal

3. We hereby undertake to state that we shall always abide by such of the provisions of Bio-Medical Waste (Management & Handling) Rules, 2016 as made applicable to us from time to time by appropriate authorities. We shall also undertake the segregation of Bio-Medical Waste at the point of generation in our premises by our staff in accordance with the usual norms as prescribed.
4. We hereby have given our consent to pay a sum of Rs. 500/- towards enrolment of our Hospital.
5. We also give our consent to pay a minimum monthly charge of Rs.1000/- towards service charges for collection, transportation and treatment and disposal of Bio-Medical Waste and also for secured landfill.
6. We understand that we have to enter into a Memorandum of Understanding with M/s. **SAFENVIRON UNIT II** and we shall do so duly complying with all the provisions as and when such a format is sent to us.
7. Please accept the enrolment form and the fee and sent your official stamped receipt for our record.

For SAFENVIRON

Proprietor

PRINCIPAL
VIJAYA INSTITUTE
PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU VIJAYAWADA 521 108

Authorized Signature.

PRINCIPAL
VIJAYA INSTITUTE
PHARMACEUTICAL SCIENCES FOR WOMEN

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding is made this day, the 8th
day of February 2021 between:

SAFENVIRON UNIT II VIJAYAWADA, represented by

Its Proprietor V. Venkateswara Rao hereinafter called the 1st party on the one part.

and

**VIJAYA INSTITUTE OF
PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU, VIJAYAWADA
PIN - 521 108**

represented by Dr. S. Padmalatha

hereinafter called the 2nd party on the other part.

Whereas the first party, having been issued " **Authorization**" by AP Pollution Control Board, Hyderabad to run its **Bio-Medical Waste Treatment Plant** established in Dharmavarappadu Thanda Village, Jaggaiah Pet Mandal, Krishna District. And whereas the second Party having got enrolled with the first party for collection, transporting, safe disinfecting and disposal of Bio-Medical Waste generated by the second party in their Pharmacy college and thus comply with the norms as prescribed under **Bio-Medical Waste** (Management and Handling) Rules, 2016.

And whereas both the parties felt it desirable and necessary to have the terms and conditions agreed upon put in writing. Now, therefore the indenture is made as shown below:

1. The first party, after proper enrolment and complying with the procedures by the Second party, shall ensure regular lifting of all items of "**Bio-Medical Waste**", as defined under relevant Act and Rules made thereunder, from the premises of the second party on a regular basis and normally within 24 hours but not beyond 48 hours of its generation. It is clarified that **Bio-Medical Waste** includes all categories as defined under relevant Act and Rules but does not include Food waste, Sweep Dust, Packing Paper including cartons for Medicines, Polythene or other waste bags and such other general items which are not considered to be items of **Bio-Medical Waste**.

2. The first party will provide non-chlorinated plastic bags with bar-coding on payment basis to the second party and it shall be the responsibility of the second party ensure segregation of **Bio-Medical Waste** generated in their premises everyday in the bags by their own staff and get them sealed and kept at a particular spot as identified by both the parties to enable the collection of the same by the staff of the first part.
3. The second party will make available needle destroyers/10% sodium hypochlorite in their premises and has to ensure that all disposable syringes and needles are destroyed including syringes heads immediately after use and thus ensure prevention of any reuse or misuse of used syringes and needles since reuse is dangerously hazardous.
4. The first party or their nominee will issue a proper receipt or acknowledgement of lifting of **Bio-Medical Waste** from the premises of second party regularly to be counter signed by the second party or their nominee. While implementing bar-coding a digital manifest will be mailed to the second party.
5. The second party shall make payment of prescribed charges for the services rendered by the first party on a monthly basis. This charge is liable for revision by the first party in consultation with APPCB Technical Committee and will be intimated in advance to second party. The monthly payments have to be made on or before 5th of every month in advance under any circumstances. The bed strength as shown by the second party while obtaining authorization from APPCB or the actual bed strength, whichever is higher, will be taken for calculation purpose of bed strength.
6. If the second party fails to make payment of monthly charges consecutively for 2 months or is found to be regularly irregular, the first party will intimate to the APPCB (RO) and stop collection of **Bio-Medical Waste** after 15 days of such intimation. In such cases, the discretion for re-enrolment of the second party lies with the first party after the receipt of all accumulated arrears with interest.
7. It shall be the sole responsibility of the second party to obtain authorization from APPCB after which only the first party will start collection of **Bio-Medical Waste**.


8. Any dispute or difference of opinion between both the parties shall first be referred to IMA Branches / APNA chapter for arbitration failing which the matter will be settled in a court of law in Vijayawada, Krishna District of Andhra Pradesh.
9. Both parties shall ensure conformity with all norms, rules and procedures as prescribed from time to time by the appropriate Govt. or other competent authorities as both the parties share a joint responsibility to help for the protection of environment from hazardous **Bio-Medical Waste** generated every day.
10. Both the parties covenant that either party retains right to terminate the agreement in case it is not willing to continue further or are not satisfied with the other's services by giving a clear notice of 3 months in writing to other party with a copy marked to APPCB.
11. Any or all terms and conditions in this **Memorandum** can be amended or modified At any time with the mutual consent of both the parties at any time.

In witness whereof the parties hereto set their hands to this **Memorandum of Understanding** on the 8th day of February 2021

For and on behalf of **SAFENVIRON UNIT II**
SAFENVIRON UNIT II,


Proprietor

For and on behalf of ...

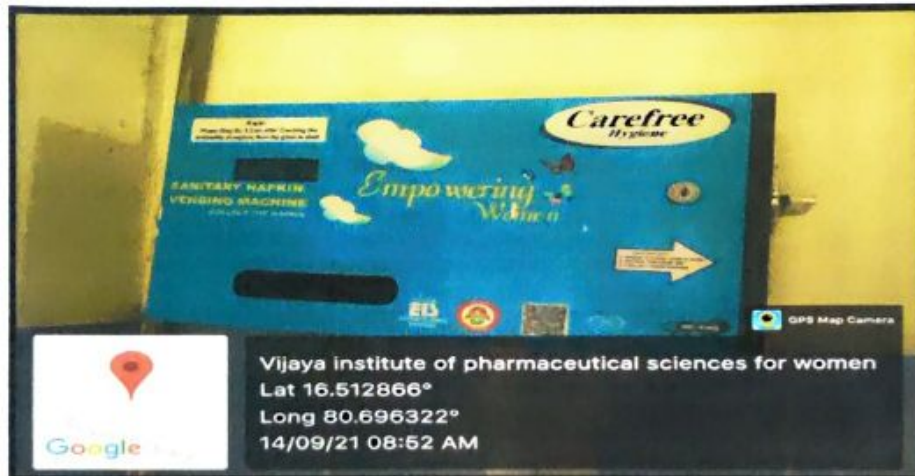
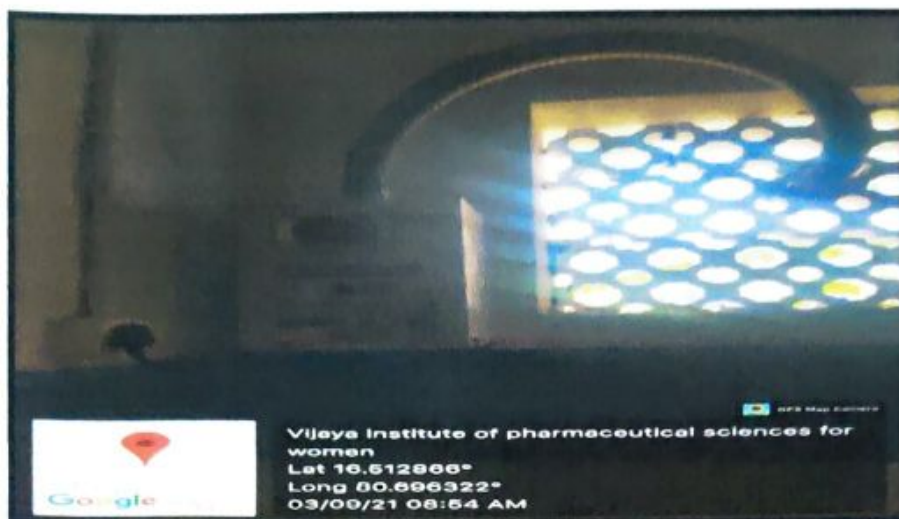

- VIJAYA INSTITUTE OF
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ENIKEPADU, VIJAYAWADA
PIN - 521 108

WITNESS:-

1. :
2. :

Bio Medical Waste Management

Sanitary Napkin Incinerators



Coordinator




Principal

**VIJAYA INSTITUTE OF
PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU, VIJAYAWADA
PIN - 521 108**



Elevate Info. System

Elevate Info System

A-1 Block B Nav durga Market Noida
Uttar Pradesh 201307
Phone 7836888806 , 9680000315
GSTIN 09AAGFE6392R1ZI

TAX INVOICE

Invoice No. : EIS0924
Invoice Date : 09/01/21
Terms : Due on Receipt
Due Date : 09/01/21

Place Of Supply : Andhra Pradesh (37)

Bill To

Vijaya Institute Of Pharmaceutical Sciences For Women

Behind samsung godown,
Pratap industries road,
Enikepadu,
Vijayawada,
Vijayawada
521108 Andhra Pradesh India
Phone

Ship To

Behind samsung godown,
Pratap industries road,
Enikepadu,
Vijayawada,
Vijayawada
521108 Andhra Pradesh
India
Phone
80086 51333

Line No.	Item & Description	Brand Name	HSN	Qty	Rate	IGST	Amount
1	nano Incinerator Nano Incinerator Burning Capacity : 4-6 napkin in one cycle 40-60 Napkin in a day. Material : Mild Steel Warranty : 1 year Exhaust Pipe: GI Pipe 2 Miter Ash : 1 Gm Watt: 800	EIS	8417	7.00	4,600	18%	32,200

Total In Words
Rupees Thirty-Nine Thousand Six Hundred Ninety-Six Only

Shipping cost on actual
One Year Replacement Warranty
This price is for 7 unit

Payment Options

Bank Name: Bank of Baroda
Acc Name: Elevate Info System
Account No: 29280500008984
IFSC: BARBOMUNIRK
Note: Fifth letter is Zero in IFSC
ACC Type: Current Acc
Branch: Munirka Delhi

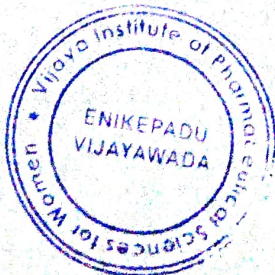
Sub Total 32,200
IGST18 (18%) 5,796
Shipping charges 1,700
Total ₹39,696
Balance Due ₹39,696

Manish Mittal

For ELEVATE INFO SYSTEM
Manish Mittal
Partner

Authorized Signature

Terms & Conditions
Transportation charges will be extra on actual.



Manish Mittal
PRINCIPAL
VIJAYA INSTITUTE
PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU VIJAYAWADA 521 108

Pickup

FedEx Pickup Confirmation—FedEx Express Domestic NDCA115

Thank you for shipping with FedEx. Your pickup request has been scheduled. FedEx will pick up your packages at the address below.

Country/Territory	India	FedEx Express	Confirmation no. NDCA115
Company	ELEVATE INFO SYSTEM office	Pickup date	09/01/2021
Contact name	Abhishek	Total no. of packages	10
Address 1	A1 B Block Nav durga Market	Shipment type	Domestic
Address 2	noida sector 53	Total weight	100 kg
City	Noida	Pickup time	10:30am - 6:00pm
Postal code	201307		
Phone no.	7836888806		

Alert:

Your confirmation number will be stored in your pickup history for up to 30 days. Any changes or cancellations you make to this pickup will be updated in your pickup history. However, please record your confirmation number and any changes for your records. Please have all required shipment information completed prior to pickup. You may contact FedEx Customer Service for assistance.



VIJAYA INSTITUTE
PRINCIPAL
PHARMACEUTICAL SCIENCES FOR WOMEN
ENKEPADU VIJAYAWADA 521 108

Bio – Waste bins in Laboratories



Coordinator




Principal

PRINCIPAL
VIJAYA INSTITUTE
PHARMACEUTICAL SCIENCES FOR WOMEN
ENIKEPADU, VIJAYAWADA - 521 116

SAFENVIRON P. Ltd.,
Office : D.No.29-3-14, Venkateswara Rao Street,
Governorpet, Vijayawada-2. Ph : 2433355, 98481 23355
Plant : Dharmavarappadu Thanda (V), Jaggayyapet, (M), Krishna Dt.

No. **272703** For Bags : SAFE MEDI AIDS
2498355, 9299553355

(An authorised agency of A.P. Pollution Control Board)
CFO No : KD-619/APPCB/CBMWTF/VJY/CFO/2019

BIO-MEDICAL WASTE MANIFEST

Bio Medical Waste received from 20 Date 19/6/22

HCE Code : _____ Time : _____

HCE Name : విజయవాడ నగర పంచాయతీ

	Kgs.	Bags		Kgs.	Bags
Yellow	<input type="checkbox"/>	<input type="checkbox"/>	White	<input type="checkbox"/>	<input type="checkbox"/>
Red	<input type="checkbox"/>	<input type="checkbox"/>	Blue	<input type="checkbox"/>	<input type="checkbox"/>

For Safenviron P. Ltd.

Generator's Certificate : I here by declare that the contents of the consignment are fully and accurately described above. They are packed, marked and labeled in proper manner category wise for transportation by road complying with prescribed norms and regulations.

APPCB 17/6/22
Signature of HCE with stamp and Date

SAFENVIRON P. Ltd.,
Office : D No.29-3-14, Venkateswara Rao Street
Governorpet, Vijayawada-2 Ph. 2433355 98481 23355
Plant : Dharmavarappadu Thanda (V) Jaggayyapet (M) Krishna Dt.

No. **283052** For Bags : SAFE MEDI AIDS
2498355 9299553355

(An authorised agency of A.P. Pollution Control Board)
CFO No : 619/CBMWTF/VJY/CFO/2010-726

BIO-MEDICAL WASTE MANIFEST

Bio Medical Waste received from _____ Date 12-8-22

HCE Code : _____ Time : _____

HCE Name : విజయవాడ నగర పంచాయతీ

	Kgs.	Bags		Kgs.	Bags
Yellow	<u>0500</u>	<u>1</u>	White	<input type="checkbox"/>	<input type="checkbox"/>
Red	<input type="checkbox"/>	<input type="checkbox"/>	Blue	<input type="checkbox"/>	<input type="checkbox"/>

APPCB 12/8/22
For Safenviron P Ltd

Generator's Certificate : I here by declare that the contents of the consignment are fully and accurately described above. They are packed, marked and labeled in proper manner category wise for transportation by road complying with prescribed norms and regulations.

Signature of HCE with stamp and Date

SAFENVIRON P. Ltd.,
Office : D.No.29-3-14, Venkateswara Rao Street,
Governorpet, Vijayawada-2. Ph: 2433355, 98481 23355
Plant : Dharmavarappadu Thanda (V), Jaggayyapet (M), Krishna Dt.

No. **223952** For Bags : SAFE MEDI AIDS
2498355, 9299553355

(An authorised agency of A.P. Pollution Control Board)
CFO No : 619/CBMWTF/VJY/CFO/2010-726

BIO-MEDICAL WASTE MANIFEST

Bio Medical Waste received from _____ Date 17/8/22

HCE Code : _____ Time : _____

HCE Name : విజయవాడ నగర పంచాయతీ

	Kgs.	Bags		Kgs.	Bags
Yellow	<input type="checkbox"/>	<input type="checkbox"/>	White	<input type="checkbox"/>	<input type="checkbox"/>
Red	<input type="checkbox"/>	<input type="checkbox"/>	Blue	<input type="checkbox"/>	<input type="checkbox"/>

For Safenviron P Ltd

Generator's Certificate : I here by declare that the contents of the consignment are fully and accurately described above. They are packed, marked and labeled in proper manner category wise for transportation by road complying with prescribed norms and regulations.

APPCB 17/8/22
Signature of HCE with stamp and Date