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:**……..