



# Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

## Application for Consent/ Authorisation

Sir,  
I/We hereby apply for\*

- Consent to Establish/Operate/Renewal of consent under section 25 and 26 of the Water (Prevention & Control of Pollution) Act, 1974 as amended.
- Consent to Establish/Operate/Renewal of consent under Section 21 of the Air (Prevention and Control of Pollution) Act, 1981, as amended.
- Authorization/renewal of authorization under Bio-Medical Wastes Management Rules, 2016 as amended, Hazardous waste (M,& TM)n Rules, 2016, in connection with my/our/existing/proposed activity from the premises as per the details given below.

### 1.General Information

**UAN No:**  
MPCB-CONSENT-0000257434

**Application submitted on:**  
13-08-2025

### Industry Information

**Industry Type:** O88 Health-care Establishment  
(as defined in BMW Rules)

**Category:** Orange

**Scale:** S.S.I

**Consent To:** Establish (New)

**Submit to:** SRO - Dhule

### Perticulars of Applicant (Owner/Occupier/Any other Authorised Person)

<b>First Name</b>	<b>Father / Husband Name</b>	<b>Last Name</b>	<b>Designation</b>
Dr. ARIF AHMED	YUSUF	SHAIKH	DMS
<b>Mobile No</b>	<b>Telephone/Fax</b>	<b>Email</b>	<b>Aadhar No</b>
9028173828	00	Assalamhospital786@gmail.com	314256418755
<b>PAN No</b>	<b>Address</b>	<b>Pin Code</b>	
GWDP56119B	MOLGI ROAD JAMIA NAGAR AKKALKUWA DIST NANDURBAR	425415	

## 2. Health Care Facility (HCF) Information

### a) Name of the Health Care Facility

AS-SALAM HOSPITAL

### b) Address for Correspondance

<b>Pin Code</b>	<b>District</b>	<b>City/Town</b>
425415	Nandurbar	Akkalkuwa
<b>Survey/Gut No.</b>	<b>Name of premises /Building</b>	<b>Road/Street</b>
	AS-SALAM HOSPITAL	MOLGI ROAD JAMIA NAGAR
<b>Area/Locality</b>	<b>Email</b>	<b>Website URL</b>
Akkalkuwa	Assalamhospital786@gmail.com	00

### c) Onwership of Facility

Private ( Ownership under trust)

**Name of the Trust / Company** JAMIA ISLAMIA ISHATUL ULOOM

### Land Ownership

Self Owned

### d) Month and year of commissioning of the HCF

16/05/2023

### e) Area of the Facility / Hospital

<b>i) Total plot area (in square meter)</b>	<b>ii) Built up area (in square meter)</b>	<b>iii) Open Plot Area (Sq.Mtr)</b>
2325	6050	500.00

### f) Enter Latitude and Longitude of site (In degrees)

<b>Latitude (In degrees)</b>	<b>Longitude (In degrees)</b>
1	1

### g) Does HCF have Operation Theatre

No

**Number of OT** 1

h) Does HCF have Laundry facility in premises No

i) Does HCF have Canteen/Cafeteria facility in premises No

j) Does HCF have Hostel/Residential quarters in premises No

## 3. BMW Authorization Details

### a) Type of health treatment system

Unani

### b) Bombay Nursing Home Registration Details

<b>Total number of Beds</b>	<b>BNH Registration Number</b>	<b>Valid Upto</b>	<b>First Issued Date</b>
100	DHO R NO 02	31-03-2026	16-05-2023

### Certificate issuing Authority

District Health Officer

### c) Diagnostic and Pharma Facilities available in Premises

<b>Pathology Lab</b>	Yes	<b>Average Samples/day</b>	35
<b>Blood Bank</b>	No		

#### 4. Consent Details

##### a) Sources of Water

**i) Surface Water** No

**ii) Ground Water** Yes

<b>Number of Borewell</b>	<b>Number of Openwell</b>	<b>Qty of Water Extracted (CMD)</b>
1	0	35

**Do you Have CGWA NOC** No

**iii) Tanker Water** No

##### b) Water Consumption Details

<b>Raw Water (CMD)</b>	<b>Recycle Water (CMD)</b>	<b>Total Water Quantity Requirement (CMD)</b>
35	00	35.00

##### c) Water consumption for different uses (CMD)

<b>Purpose</b>	<b>Consumption</b>	<b>Effluent Generation</b>	<b>Disposal</b>
<b>Domestic Pourpose</b>	34	32	On Land For Gardening
<b>Pathology Laboratory, Floor washing, Operation Theater</b>	01	01	Local Bodies Sewer
<b>Laundry</b>	00	00	On Land For Gardening
<b>Industrial Cooling, spraying in mine pits or boiler feed</b>	00	00	On Land For Gardening
<b>Total</b>	35.00	33.00	

##### d) Waste Waster Treatment

**Have you installed STP or ETP**

No

##### e) Other waste generation details

###### 1) Municipal Solid Waste

**a) Biodegradable Waste(kg/day)**

5.00

**b) Recyclable Waste(kg/day)**

0.00

**c) Domestic Hazardous Waste(kg/day)**

0.00

##### Air Pollution

**Whether D.G. Set Installed**

Yes

<b>Capacity(KVA)</b>	<b>Make</b>	<b>Fuel Used</b>	<b>Fuel QTY</b>	<b>Unit</b>	<b>Stack Height in meter</b>	<b>Accoustic Enclosure for noise control</b>
500	KIRLOSKAR	Diesel	10.00	Ltr/H	6.00	NO

**Do you have Boiler Installed**

No

#### 5. Additional Information

**Do you have Bio Medical Waste Management Committee Constituted**

No

**Do you have Infection Control Committee Constituted**

No