



Date: 16<sup>th</sup> June 2023

To,

The Environmental Officer  
Bangalore –Rajarajeshwari Nagar  
Karnataka State Pollution Control Board  
2<sup>nd</sup> Floor, Nisarga Bhavan,  
Thimmaiah Road, Shivannagar, Rajajinagar  
Bangalore -560010

Sir,

Sub: Submission of Annual Nil Report for the year 2022-23 in Form 3

Please find enclosed the annual report for the year 2022-23, of e-Waste generated & Disposed by M/s. SPARSH Hospital (A Unit of Shiva & Shiva Orthopaedic Hospital Pvt Ltd), No.8, Ideal Homes, HBCS Layout, Rajarajeshwarinagar, Bengaluru -560098, duly filled in Form 3.

Kindly acknowledge the same and do the needful.

Thanking you,

Yours cordially,  
For SPARSH Hospital  
(A Unit of Shiva & Shiva Orthopaedic Hospital Pvt Ltd)

Dr. B.R.Kiran Kumar  
Authorized Signatory



Encl:

1. Annual Report –Form 3

**SPARSH Hospital** (a unit of Shiva & Shiva Orthopaedic Hospital Pvt Ltd.)

No.8, Ideal Homes HBCS Layout, RR Nagar, Mysore Road, Bengaluru - 560098.

Registered office: #146, Infantry Road, Bengaluru - 560 001 | CIN No.: U85110KA2003PTC032782

Phone No : 080 61 222 000 | Email: info@sparshhospital.com | Website: www.sparshhospital.com

**FORM-3**

[See rules 4(5), 5(5), 8(6), 9(4), 10(8), 11(9), 13 (1) (xi), 13(2) (v), 13(3) (vii) and 13(4) (v)]

**FORM FOR FILING ANNUAL RETURNS**

[To be submitted by producer or manufacturer or refurbished or dismantler or recycler by 30<sup>th</sup> day of June following the financial year to which that return relates].

**Quantity in Metric Tonnes (MT) and numbers**

1	Name and address of the producer or manufacturer or refurbished or dismantler or recycler	<b>SPARSH Hospital (A Unit of Shiva &amp; Shiva Orthopaedic Hospital Pvt Ltd), No.8, Ideal Homes, HBCS Layout, Rajarajeshwarinagar, Bengaluru -560098</b>		
2	Name of the authorized person and complete address with telephone and fax numbers and e-mail address	<b>Dr. B R Kiran Kumar SPARSH Hospital (A Unit of Shiva &amp; Shiva Orthopaedic Hospital Pvt Ltd), No.8, Ideal Homes, HBCS Layout, Rajarajeshwarinagar, Bengaluru - 560098 Mobile:9513466068 Email:ms.msr@sparshhospital.com</b>		
3	Total quantity of e-waste collected or channelized to recyclers or dismantlers for processing during the year for each category of electrical and electronic equipment listed in the Schedule I (Attach list) by PRODUCERS	<b>Nil</b>		
	Details of the above	<b>TYPE</b>	<b>QUANTITY</b>	<b>No.</b>
3(A)*	<b>BULK CONSUMERS: Quantity of e-waste</b>	<b>Nil</b>	<b>Nil</b>	<b>Nil</b>
3(B)*	<b>REFURBISHERS: Quantity of e-waste:</b>	<b>Nil</b>	<b>Nil</b>	<b>Nil</b>
3(C)*	<b>DISMANTLERS:</b> i Quantity of e-waste processed (Code wise); ii. Details of materials or components recovered and sold; iii. Quantity of e-waste sent to recycler; iv. Residual quantity of e-waste sent to Treatment, Storage and Disposal Facility.	<b>Nil</b>	<b>Nil</b>	<b>Nil</b>
3(D)*	<b>RECYCLERS:</b> i. Quantity of e-waste processed (Code wise);	<b>Nil</b>	<b>Nil</b>	<b>Nil</b>



	ii. Details of materials recovered and sold in the market; iii. Details of residue sent to Treatment, Storage and Disposal Facility.			
4	Name and full address of the destination with respect to 3(A)-3(D) above	NA		
5	Type and quantity of materials segregated or recovered from e-waste of different codes as applicable to 3(A)-3(D)	Type NA	Quantity NA	

✓ Enclose the list of recyclers to whom e-waste have been sent for recycling.

Place Bangalore

Date 16-06-2023

  
Signature of the authorised person

Note:-

- (1) \* Strike off whichever is not applicable
- (2) Provide any other information as stipulated in the conditions to the authorizer
- (3) In case filing on behalf of multiple regional offices, Bulk Consumers and Producers need to add extra rows to 1 & 3(A) with respect to each office.

