

ATHER

Date : 08/06/2026

To,
The District Environmental Engineer
Tamilnadu Pollution Control Board,
Hosur Taluk, Krishnagiri District,
Pin : 635126

Dear Sir,

Ref: Biomedical waste Authorisation : 25BAZ63665431 dated 11/03/2025

Sub : Biomedical waste annual report for the year 2025

Please find the enclosed Annual report for the year 2025 of Ather Energy Limited, Unit 1, 159/2B2, in Form 4 under the rules of Bio medical waste management rules, 2016.

Herewith request you to kindly acknowledge the letter of receipt.

Thanking you,

Your Faithfully,
For Ather Energy Ltd. Unit 1



Authorized Signatory



Ather Energy Limited
(formerly known as Ather Energy Private Limited)
Unit 1 Battery Plant: No.159/2B2, Maragathammbal Industrial
and Logistics Park LLP, Madhagondapalli Village,
Denkanikotta Taluk, Krishnagiri District, Tamilnadu - 635114,

Registered Office: 3rd Floor, Tower D, IBC Knowledge Park,
Bannerughatta Main Road, Bengaluru, Karnataka - 560029.



Website : www.atherenergy.com
Phone : 080-664-65750
Email : info@atherenergy.com
CIN Number : U40100KA2013PLC093769

Form IV
(See rule 13)

ANNUAL REPORT

Sl. No.	Particulars		
1 .	Particulars of the Occupier	:	
	(i) Name of the authorized person (occupier or operator of facility)	:	Mr. Ananiya Prabhu
	(ii) Name of HCF or CBMWTF	:	Ather Energy Limited Unit 1, Battery Plant
	(iii) Address for Correspondence	:	Ather Energy Limited Unit 1 Battery Plant, 159/2B2, Maragathammbal Industrial and Logistics park, LLP, Madhagondapalli Village, Denkanikottai Taluk, Krishnagiri District, Tamil Nadu- 635114
	(iv) Address of Facility		Ather Energy Limited Unit 1 Battery Plant, 159/2B2, Maragathammbal Industrial and Logistics park, LLP, Madhagondapalli Village, Denkanikottai Taluk, Krishnagiri District, Tamil Nadu- 635114
	(v) Tel. No, Fax. No	:	9600311683
	(vi) E-mail ID	:	ananiya.prabhu@atherenergy.com
	(vii) URL of Website		https://www.atherenergy.com/
	(viii) GPS coordinates of HCF or CBMWTF		
	(ix) Ownership of HCF or CBMWTF	:	
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No: 25BAZ63665431 One time authorisation
	(xi). Status of Consents under Water Act and Air Act	:	Valid Upto : 31/03/2028
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	
	(ii) Non-bedded hospital	:	0(including OHC)
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		
	(iii) License number and its date of expiry		-
3.	Details of CBMWTF	:	NA

	(i) Number healthcare facilities covered by CBMWTF	:	NA																																																
	(ii) No of beds covered by CBMWTF	:	NA																																																
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	NA																																																
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	NA																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category: 13.99 Kg Red Category : 11.11 Kg White: 1.874 Kg Blue Category : 0.39 Kg General Solid waste: -																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	Size : Small bins Capacity : - Provision of on-site storage: Colour coded bins.																																																
	Disposal facilities		Not applicable <table> <thead> <tr> <th>Type of treatment equipment</th><th>No of units</th><th>Capacity Kg/day</th><th>Quantity treated or disposed in kg per annum</th></tr> </thead> <tbody> <tr><td>Incinerators</td><td></td><td></td><td></td></tr> <tr><td>Plasma Pyrolysis</td><td></td><td></td><td></td></tr> <tr><td>Autoclaves</td><td></td><td></td><td></td></tr> <tr><td>Microwave</td><td></td><td></td><td></td></tr> <tr><td>Hydroclave</td><td></td><td></td><td></td></tr> <tr><td>Shredder</td><td></td><td></td><td></td></tr> <tr><td>Needle tip cutter or destroyer</td><td></td><td>-</td><td></td></tr> <tr><td>Sharps encapsulation or concrete pit</td><td></td><td>-</td><td></td></tr> <tr><td>Deep burial pits:</td><td></td><td></td><td></td></tr> <tr><td>Chemical disinfection:</td><td></td><td>-</td><td></td></tr> <tr><td>Any other treatment equipment:</td><td></td><td></td><td></td></tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer		-		Sharps encapsulation or concrete pit		-		Deep burial pits:				Chemical disinfection:		-		Any other treatment equipment:			
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity generated Where disposed Incineration Ash ETP Sludge
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	:	
	(vii) List of member HCF not handed over bio-medical waste.		
6	Do you have a bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Yes & MOM attached
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		1
	(ii) number of personnel trained		11
	(iii) number of personnel trained at the time of induction		2
	(iv) number of personnel not undergone any training so far		Nil
	(v) whether standard manual for Is training available?		Yes
	(vi) any other information)		
8	Details of the accident occurred during the year		Nil
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.		
9.	Are you meeting the standards of air pollution from the incinerator? How many times in last year could not met the standards?		NA

	Details of Continuous online emission monitoring systems installed		
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NA
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12	Any other relevant information	:	Nil

Certified that the above report is for the period from January 2025 to December 2025.

Date: 08/06/2026

Place: Hosur

 

Signature of the Authorized person

ATHER	BMW Committee	Doc. No	AE/BMWC/MOM/01
	Minutes Of Meeting	Rev. No.	01
		Rev. Date	22/08/2024
		Eff. Date	22/08/2024

Location : Hosur Factory		Date of meeting: 24/02/2025
Purpose : BMW Committee Meeting		
MEMBERS PRESENT	DISCUSSION POINTS	
Rakesh Singha Ananiya Prabhu M Suresh R Sneha S	❖ Briefing on the legal requirements ❖ Discussion on the MOM of last BMW Committee Meetings ❖ BMW consolidation of Disposal and Generation ❖ Improvements made ❖ Suggestions and Remarks	
Prepared By : Sneha S		Date: 24.02.2025

ATHER	BMW Committee	Doc. No	AE/BMWC/MOM/01
	Minutes Of Meeting	Rev. No.	01
		Rev. Date	22/08/2024
		Eff. Date	22/08/2024

Points discussed:

1. Root cause analysis for the delay in acquiring the BMW Authorisation
2. Addressing the Non compliance
3. Validation of the first aid cases and the BMW generation
4. Vendor Site audit - verification of disposal mechanism
5. Implementation of Disposable bed covers - trail basis.
6. Medical examination of workers to be done before allowing them to take rest, to address the issue of increasing number of individuals bound to take rest.

Suggestions:

1. Updation of BMW generation and Disposal Template - with permissible limits
2. Document verification of Resustainability and Addition of a "Clause" in the agreement, if in case of violations to be made
3. Refresher trainings for the personnel who handle the BMW has to be provided
4. Preparation of SOP for the weighment and disposal of BMW
5. Inventory tracking on the BMW color coded Covers and the medicine stock
6. Maintain an MIS and inform the stakeholders of the Non Compliance retained on a monthly basis.

ATHER	BMW Committee	Doc. No.	AE/BMWC/MOM/01
	Minutes Of Meeting	Rev. No.	01
		Rev. Date	22/08/2024
		Eff. Date	22/08/2024

Location : Hosur Factory		Date of meeting: 20/05/2025
Purpose : BMW Committee Meeting		
MEMBERS PRESENT	AGENDA	
<u>Rakesh Singha</u> <u>Ananiya Prabhu M</u> <u>Suresh B</u> <u>Sneha S</u> Title V	❖ Legal Compliance status ❖ Discussion on the MOM of last BMW Committee Meetings ❖ BMW consolidation of Disposal and Generation ❖ Improvements to be made ❖ Suggestions and Remarks	
Prepared By : Sneha S		Date: 20.05.2025

ATHER	BMW Committee	Doc. No.	AE/BMWC/MOM/01
	Minutes Of Meeting	Rev. No.	01
		Rev. Date	22/08/2024
		Eff. Date	22/08/2024

Points discussed:

1. New Bio Medical Waste Authorisation Obtained
2. Training and Awareness Provision to the Person involved in handling the Bio medical waste.
3. Achieving Consent Condition Compliance.
4. SOP defined for handling of Bio medical waste.

ATHER	BMW Committee	Doc. No	AE/BMWC/MOM/ 01
	Minutes Of Meeting	Rev. No.	01
		Rev. Date	22/08/2024
		Eff. Date	22/08/2024

Location : Hosur Factory		Date of meeting: 15/12/2025
Purpose : BMW Committee Meeting		
MEMBERS PRESENT	AGENDA	
Rakesh Singha Pranaya Prabhu M Ajay V Anand PK Sneha S Chairman - Mrs.Kousalya	❖ Legal Compliance status ❖ Discussion on the MOM of last BMW Committee Meetings ❖ BMW consolidation of Disposal and Integration ❖ Improvements to be made	
Prepared By : Sneha S		Date: 15.12.2025

ATHER	BMW Committee	Doc. No	AE/BMWC/MOM/01
	Minutes Of Meeting	Rev. No.	01
		Rev. Date	22/08/2024
		Eff. Date	22/08/2024

Points discussed:

1. Review of Inprogress compliance consent conditions were addressed:
 - a. Bar code - As an containment action temporary Barcode is to be prepared and put into use until the vendor provides, and submission to be made to TNPCB
 - b. Disposal Compliance of not exceeding 48 hours is in progress and will be put into place from the month of Jan
2. The Graphs depicting the Bio Medical waste generation and disposal is to be updated with category specific.
3. The resting cases data to be further validated across departments and shifts to analyse the root cause and address the issues
 - Check the disposal of Biomedical waste generated from ambulance during the time of emergencies
 - Internal audit is to be carried out on regular intervals
 - Periodic Refresher Trainings for nurse, House keeping employees to be done
 - Integration of Click Application to enhance the data validation
 - The data to be updated in the website shall be in the same UOM.
 - The safety stock of Biomedical waste handling covers are to be maintained.