**FORM-I**  
[See rule 15 (V) 16 (1)©, 21 (3)]

Application for obtaining authorization under solid waste management rules for processing / recycling/treatment and disposal of solid waste

To  
The Member Secretary,  
J&K State Pollution Control Board,  
……………………………………  
Sir,

I/We hereby apply for authorization under the Solid Waste Management Rules, 2016 for processing, recycling, treatment and disposal of solid waste.

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<td>1.</td>
<td>Name of the local body / agency appointed by them/ operator of facility</td>
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| 2. | Correspondence address  
Telephone No.  
Fax No., e-mail: |
| 3. | Nodal Officer & designation (Officer authorized by the local body or agency responsible for operation of processing / treatment or disposal facility) |
| 4. | Authorisation required for setting up and operation of the facility (Please tick mark)  
Waste processing  
Recycling  
Treatment  
Disposal at landfill |
| 5. | Attach copies of the documents  
Site clearance (local body)  
Proof of Environmental clearance  
Consent for establishment  
Agreement between municipal authority and operating agency  
Investment on the project and expected return |
| 6. | Processing / recycling/treatment of solid waste  
(i) Total Quantity of waste to be processed per day  
Quantity of waste to be recycled  
Quantity of waste to be treated  
Quantity of waste to be disposed into landfill  
(ii) Utilisation programme for waste processed (Product |
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| (iii) | Methodology for disposal (attach details)  
Quantity of leachate  
Treatment technology for leachate |
| (iv) | Measures to be taken for prevention and control of environmental pollution |
| (v)  | Measures to be taken for safety of workers working in the plant |
| (vi) | Details on solid waste processing / recycling / treatment / disposal facility |

7. Disposal of solid waste  
   Number of sites identified  
   Quantity of waste to be disposed per day  
   Details of methodology or criteria followed for site selection (attach)  
   Methodology and operational details of landfilling  
   Measures taken to check environmental pollution

8. Any other information

Date: [ ]
Signature: [ ]

Place: [ ]
Designation: [ ]