

**FORMAT FOR OBTAINING INFORMATION FROM THE DYES AND DYE
INTERMEDIATE INDUSTRIES UNDER CREP PROGRAMME**

A. PRELIMINARY

1. Name of the Industry (Unit):

2. Products manufactured:

Name of the Products	Quantity (T/Year)
i.
ii.
iii.
iv.
v.
vi.
vii.

(if more than 7, then please provide in separate sheet)

3. Location of the Factory

Whether in INDUSTRIAL ESTATE/ INDUSTRIAL AREA / ISOLATION

3a. Are you a member of CETP Yes No

3b. If 3a is yes, please indicate the name of CETP.....

4. Details of Industry

Address Registered Office Factory

Telephone No.

E-Mail.

5. Scale of operation (Please put Mark)

Small Scale Medium Scale Large Scale

6. Do you have valid consents from State Pollution Control Board

a) Under Water Act Yes

- If yes, provide the validity Period:

- If no, reasons thereof :.....

b) Under Air Act Yes No

- If yes, provide the validity Period:

- If no, reasons thereof:

B ACTION TAKEN UNDER CREP PROGRAMME

1. Do you have any programme for recovery and purification of bye-products?

Yes No

1(a) If (1) is yes, is it already in practice or it is on proposal stage?

Proposal Stage In practice

1(b) if it is in proposal stage, give details of programme with fixed time target.

1(c) if it is in Practice, Provide details:

1(d) if (1) is no, what are the Constraints or Reasons? Please spell briefly

2. Do you have incinerator? Yes No

2(a) if yes, provide details of design along with parameters such as temperature, residence time, double stage or single stage etc.

3. Is there any waste exchange programme with other Industry for proper use of weak acid

Yes No

3(a) if yes, details thereof

i) Quantity Kg/day:

ii) Name of partner Industry
and its location :

4. Do you have regular monitoring programme for ground water at the vicinity?

Yes No

4(a) if yes, Please provide details as follows

a) Number of monitoring station:

b) Depth of monitoring station in meter:.....

c) Parameters :.....

5. Whether Waste generated from one Industry is used by other? Yes No

5(a) if (5) yes, details thereof

i) Quantities Kg/day:

ii) Name and address of partner Industries:.....

iii) Purpose (Brief description):

5(b) If (5) No, what are the constraints:

6. Do you have any waste minimization programme on practice Yes No

6(a) if '6' is Yes, provide details

i)

6(b) If '6' is No, Please provide the proposal

7. Is there any possibility for introduction of spray drying instead of salting

Already existed under study No programme

7(a) If, it is existed, please provide details

7(b) If, it is under study, please indicate when it will be completed
(indicate the date and month)

7(c) If, there is no programme, What are the reasons?

C. FOR H ACID INDUSTRIES ONLY

1. (a) Whether any yield improvement programme is initiated ? Yes No

1 (b) if No, when it will be initiated (Please provide time frame)

2. Whether any feasibility study has been conducted? Yes No

2 (a) If yes, what is the outcome (Please provide details)

2 (b) If No, when it shall be initiated (Please provide time frame)

D. AIR POLLUTION MANAGEMENT

1. Is the scrubbing system up- gradation programme initiated? Yes No

1(a) If yes, what are the outcome and action programme
(with time frame may be provided)

1(b) If No, reasons thereof and when it will be initiated?

2. Do you have any programme for volatile organics loss minimization programme

Yes No

2(a) If Yes, Provide the action plan

2 (b) If No, reasons thereof-

E. SOLID WASTE MANAGEMENT PROGRAMME

1. Do you generate solid waste Yes No

1 (a). If yes, please mention quantity as follows

Solid waste Quantity Kg/M

Hazardous

Non-Hazardous

1(b) if Hazardous, are you a member of commune facility. Yes No

if Yes, indicate the name

1(c) Do you have authorization from SPCB Yes No

F. BETTER MANAGEMENT PRACTICE

1. Do you have a house keeping up-gradation programme? Yes No

1(a) If Yes, Please provide the programme details.