



## Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Thank you. Your payment has been successfully received with following details.

### Transaction Receipt

**Transaction Status:** Success  
**Transaction Reference no:** CIOBZ1B1D2YDN5  
**Transaction no:** TXN2602005639  
**Transaction On:** 25-02-2026 13:30:11  
**Payment For:** MPCB-CONSENT-0000278861  
**Email:** dhartiayurvedpathari@gmail.com  
**Mobile no:** 9404732939  
**Amount:** 15000.00 INR.

  
**Principal**

Dharti Ayurved College & R.I.  
Pohetakli Tq.Pathri Dist.Parbhani.



# Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

## Application for Consent/ Authorisation

Sir,  
I/We hereby apply for\*

1. Consent to Establish/Operate/Renewal of consent under section 25 and 26 of the Water (Prevention & Control of Pollution) Act, 1974 as amended.
2. Consent to Establish/Operate/Renewal of consent under Section 21 of the Air (Prevention and Control of Pollution) Act, 1981, as amended.
3. Authorization/renewal of authorization under Hazardous and Other Wastes (Management and Transboundary Movement) Rules, 2016 in connection with my/our/existing/proposed/alterd/ additional manufacturing/processing activity from the premises as per the details given below.

## Consent Information

**UAN No:**

MPCB-CONSENT-0000278861

**Application submitted on:**

24-02-2026

## Industry Information

**Consent To:**

Operate

**IIN No.:**

**Submit to:**

SRO - Parbhani

**Type of institution:**

Industry

**Industry Type:**

**Category:**

Red

**Scale:**

L.S.I

Revised Industry Categorization as per CPCB Guidelines 2025

**New Industry Type:**

**Sector:**

**New Category:**

**Location of industry/activity/etc:**

Local Body

**Name of Local Body:**

GRAM PANCHAYAT PATHRI

**EC Reqd.**

No

**Whether construction-buildup area is more than 20,000 sq.mtr.(Existing Expansion Unit)**

No

## General Information

1. Name, designation, office address with Telephone/Fax numbers, e-mail of the Applicant Occupier/Industry/Institution / Local Body.

**Name**

BABU DHONDAYYA SWAMI

**Address**

At Pohe Takli, Pohe takli, Parbhani

**Designation**


Principal

**Taluka**

Pathri

**Area**

**District**

  
Principal  
Dharti Ayurved College & R.I.  
At. Pohetakli Tq. Pathri Dist. Parbhani.

AT GUT NO. 60, POHETAKLI

**Telephone**

9404732939

**Email**

dhartiayurvedpathari@gmail.com

Parbhani

**Fax**

NA

**Pan Number**

DFMPS0665P

2. (a) Name and location of the industrial unit/premises for which the application is made (Give revenue Survey Number/Plot number name of Taluka and District, also telephone and fax number)

**Industry name**

DHARTI JANSEVA PRATISHTHANS DHARTI AYURVED HOSPITAL & RESEARCH INSTITUTE

**Location of Unit**

Pohe Takli

**Survey number/Plot Number**

60

**Taluka**

Pathri

**District**

Parbhani

(b) Details of the planning permission obtained from the local body/Town and Country Planning authority/Metropolitan Development authority/ designated Authority.

**Planning permission**

GRAM PANCHAYAT PATHRI

**Planning Authority**

GRAM SEVAK & SARPANCH

Name of the local body under whose jurisdiction the unit is located and Name of the licence issuing authority

**Name of Local Body**

GRAM PANCHAYAT PATHRI

**Name of the licence issuing authority**

GRAM PANCHAYAT PATHRI

**Sanction plan/ Approved layout Plan/Commencement Certificate**

3. Names, addresses with Telephone and Fax Number of Managing Director / Managing Partner and officer responsible for matters connected with pollution control and/or Hazardous waste disposal.

**Name of Managing Director**

BABU DHONDAYYA SWAMI

**Telephone number**

9421895595

**Fax number**

**Officer responsible for day to day business**

BABU DHONDAYYA SWAMI

4. (a.) Are you registered Industrial unit ?

Yes

**Registration number**

062/23

**Date of registration**

Sep 5, 2023

5. Gross capital investment of the unit without depreciation till the date of application (Cost of building, land, plant and machinery). (To be supported by an affidavit/undertaking on Rs.20/- stamp paper, annual report or certificate from a Chartered Accountant for proposed unit(s), give estimated figure)

**Gross capital (in Lakh)**

368.44

**\* Verified**

CA Certificate

**\* Terms**

1

**\* Consent Fee**

15000.00

6. If the site is located near sea-shore/river bank/other water bodies/Highway, Indicate the crow fly distance and the name of the water body, if any.

**Distance From**

SH/NH

**Distance(Km)**

0.00

**\* Name**

--NA--

River

0.00

--NA--

Human Habitation

0.00

--NA--

Religious Place

0.00

--NA--

Historical Place

0.00

--NA--

  
Principal

Dharti Ayurved College & R.I.  
At, Pohetakli Tq. Pathri Dist. Parbhani.

Creek/Sea

0.00

--NA--

6b. Enter Latitude and Longitude details of site

**Latitude**

19.2

**Longitude**

76.4

7. Does the location satisfy the Requirements Under relevant Central/State Govt. Notification such as Coastal Regulation Zone. Notification on Ecologically Fragile Area, Industrial Location policy, etc. If so, give details.

<b>Location</b>	<b>Approved Industry Area</b>	<b>Sensitive Area</b>	<b>If Yes, Name Of Area</b>	<b>Industry Location with Reference to CRZ</b>
Pathri	Yes	No	NA	A4

8. If the site is situated in notified industrial estate,

(a) Whether effluent collection, treatment and disposal system has been provided by the authority.

No

**Details**

NA

(b) Will the applicant utilize the system, if provided.

No

NA

(c) If not provided, details of proposed arrangement.

ATTACHED

9.

(a) Total plot area (in square meter)

12140.6

(b) Built up area and (in square meter)

4850.85

(c) Area available for the use of treated sewage/ trade effluent for gardening/irrigation. (in square meter)

7289.75

10. Month and year of commissioning of the Unit.

2023-09-05

11. Number of workers and office staff

**Workers**

53

**staff**

55

**Hrs. of shift**

8

**Weekly off**

SUNDAY

12.

(a) Do you have a residential colony Within the premises in respect of Which the present application is Made ?

No

NA

(b) If yes, please state population staying

**Number of person staying**

0

**Water consumption**

0

**Sewage generation**

0

**Whether is STP provided?**

No

(c) Indicate its location and distance with reference to plant site.

**Number of person staying**

NA

**Water consumption**

0

13. List of products and by-products Manufactured in tonnes/month, Kl/month or numbers/month with their types i.e.Dyes, drugs etc. (Give figures corresponding to maximum installed production capacity)

**Products Name and Quantity****Principal**Dharti Ayurved College & R.I.  
At.Pohetakli Tq.Pathri Dist.Parbhani.

Product Name	UOM	Product Name	Existing	Consented	Proposed Revision	Total	Remarks
OTHERS	No.	100 BEDED HOSPITAL	0	0	100	100	

**Products Name and Quantity**

Product Name	UOM	Quantity	Remarks
NA	--NA--	0	NA

14. List of raw materials and process chemicals with annual consumption corresponding to above stated production figures, in tonnes/month or kl/month or numbers/month.

Name of Raw Material	UOM	Quantity	Hazardous Waste	Hazardous Chemicals	Remarks
100 BEDED HOSPITAL	No.	100	No	No	NA

15. Description of process of manufacture for each of the products showing input, output, quality and quantity of solid, liquid and gaseous wastes, if any from each unit process.

NA

**Part B : Waste Water aspects**

16. Water consumption for different uses (m3/day)

Purpose	Consumption	Effluent Generation	Treatment	Remarks	Disposal	Remarks
Domestic Pourpose	2	1.4	Septic Tank & Soak Pit	NA	On Land for Gardening	NA
Water gets Polluted & Pollutants are Biodegradable	0	0	--NA--	NA	--NA--	NA
Water gets Polluted, Pollutants are not Biodegradable & Toxic	0	0	--NA--	NA	--NA--	NA
Industrial Cooling, spraying in mine pits or boiler feed	0	0	--NA--	NA	--NA--	NA
Others	3 KL for Gardening & Plantation					

17. Source of water supply, Name of authority granting permission if applicable and quantity permitted.

Source of water supply	Name of Local Body	Name of authority granting permission	Quantity permitted
Local Body	Pohe Takli	NA	5

18. Quantity of waste water (effluent) generated (m3/day)

Domestic	Boiler Blowdown	Industrial	Cooling water blowdown
0	0	0	0
Process	DM Plants/Softening	Washing	Tail race discharge from
0	0	0	0

**Principal**

Dharti Ayurved College & R.I.  
At. Pohetakli Tq. Pathri Dist. Parbhani.

19. Water budget calculations accounting for difference between water consumption and effluent generated.

NA

20. Present treatment of sewage/canteen effluent (Give sizes/capacities of treatment units).

**Capacity of STP (m<sup>3</sup>/day)**

10

<b>Treatment unit</b>	<b>Size (mxm)</b>	<b>Retention time (hr)</b>
MBBR, TUBE SETTLER, MGF & ACF	200	120

21. Present treatment of trade effluent (Give sizes/capacities of treatment units) (A schematic diagram of the treatment scheme with inlet/outlet characteristics of each unit operation/process is to be provided. Include details of residue Management system (ETP sludges)

**Capacity of ETP (m<sup>3</sup>/day)**

0

<b>Treatment unit</b>	<b>Size (mxm)</b>	<b>Retention time (hr)</b>
NA	0	0

22.

**(i) Are sewage and trade effluents mixed together?**

No

**If yes, state at which stage-Whether before, intermittently or after treatment.**

NA

23. Capacity of treated effluent sump, Guard Pond if any.

**Capacity of treated effluent sump (m<sup>3</sup>)** 1

**Effluent sump/Guard pond details** No TO SOAK PIT

**If yes, state at which stage-Whether before, intermittently or after treatment.** No TO SOAK PIT

24. Mode of disposal of treated effluent With respective quantity, m<sup>3</sup>/day

**(i) into stream/river (name of river)** NA **(ii) into creek/estuary (name of Creek/estuary)** NA

**(iii) into sea** NA **(iv) into drain/sewer (owner of sewer)** NA

**(v) On land for irrigation on owned land/ase land. Specify cropped area.** OWNED LAND **(vi) Connected to CETP** NA

**(vii) Quantity of treated effluent reused/ recycled, m<sup>3</sup>/day Provide a location map of disposal arrangement indicating the outler(s) for sampling. Treated effluent reused / recycled (m<sup>3</sup>/day)** 0 **Mode of disposal types** Recycle

**Mode of disposal types other (if any)**

25. (a) Quality of untreated/treated effluents (Specify pH and concentration of SS, BOD,COD and specific pollutants relevant to the industry. TDS to be reported for disposal on land or into stream/river.

**Untreated Effluent**

**pH** 6.8

  
**Principal**

Dharti Ayurved College & R.I.  
At.Pohetakli Tq.Pathri Dist.Parbhani,

SS (mg/l)	150
BOD (mg/l)	350
COD (mg/l)	410
TDS (mg/l)	500

Specific pollutant if any	Name	Value
1	NA	0

**Treated Effluent**

pH	7.2
SS (mg/l)	20
BOD (mg/l)	12
COD (mg/l)	35
TDS (mg/l)	460

Specific pollutant if any	Name	Value
1	NA	0

(b) Enclose a copy of the latest report of analysis from the laboratory approved by State Board/ Committee/Central Board/Central Government in the Ministry of Environment expected characteristics of the untreated/treated effluent

ATTACHED

26. Fuel consumption

Fuel Type	UOM	Fuel Consumption TPD/LKD	Calorific value
Diesel	Ltr/Hr	2.5	120
Ash content	Sulphur content	Quantity	Other (specify)
0	15	1	NA

27. (a) Details of stack (process & fuel stacks: D. G. )


(a) Stack number(s)	(b) Stack attached to	(c) Capacity	(d) Fuel Type
1	Stack	NA	Diesel
(e) Fuel quantity (Kg/hr.)	(f) Material of construction	(g) Shape (round/rectangular)	(h) Height, m (above ground level)
2.5	NA	Round	7
(i) Diameter/Size, in meters	(j) Gas quantity, Nm <sup>3</sup> /hr.	(k) Gas temperature °C	(l) Exit gas velocity, m/sec.
0.3	70	NA	NA
(m) Control equipment preceding the stack	(n) Nature of pollutants likely to present in stack gases such as Cl <sub>2</sub> , Nox, Sox TPM etc.	(o) Emissions control system provided	(p) In case of D.G. Set power generation capacity in KVA
NA	NA	NA	25 KVA

27. (B) Whether any release of odoriferous compounds such as Mercaptans, Phorate etc. Are coming out from any storages or process house.

NA

28. Do you have adequate facility for collection of samples of emissions in the form of port holes, platform, ladder etc. As per Central Board Publication "Emission regulations Part-III" ( December, 1985 )

Port hole	No	Details	NA
Platform	No	Details	NA

  
**Principal**  
 Dharti Ayurved College & R.I.  
 At.Pohetaki Tq.Pathri Dist.Parbhani.

**Ladder**      No      **Details**      NA

29. Quality of treated flue gas emissions and process emissions. Quantity of treated flue gas emissions and process emissions.

<b>Sr. No</b>	<b>Stack attached to</b>	<b>Parameter</b>	<b>Concentration mg/Nm3</b>	<b>flow (Nm3/hr)</b>
1	NA	NA	0	0

(Specify concentration of criteria pollutants and industry/process-specific pollutants stack-wise. Enclose a copy of the latest report of analysis from the laboratory approved by State Board/Central Board/Central Government in the Ministry of Environment & Forests. For proposed unit furnish expected characteristics of the emissions..

NA

**Part - D: Hazardous Waste aspect**

30 Information about Hazardous Waste Management as defined in Hazardous Waste (Management & Handling ) Rules, 1989 as amended in Jan.,2000. Type/Category of Waste as per

**Waste (Annually) Schedule I**

<b>Cat No</b>	<b>Type</b>	<b>Qty</b>	<b>UOM</b>
NA		0	--NA--
<b>Max</b>	<b>Method of collection</b>	<b>Method of reception</b>	<b>Method of storage</b>
	NA	NA	NA
<b>Method of transport</b>	<b>Method of treatment</b>	<b>Method of disposal</b>	
NA	NA	NA	

**Waste (Annually) Schedule II**

31. Details about use of hazardous waste

<b>Name of hazardous waste/Spent chemical</b>	<b>Quantity used/month</b>	<b>Party from whom purchased</b>	<b>Party to whom sold</b>
NA	0	NA	NA

32.

**a. Details about technical capability and equipments available with the applicant to handle the Hazardous Waste**  
NA

**b. Characteristics of hazardous waste(s) Specify concentration of relevant pollutants. Enclose a copy of the latest report of analysis from the laboratory approved by State Board/Central Board/Central Govt. in the ministry of Environment & Forests. For proposed units furnish expected characteristics**  
NA

33.

**Copy of format of manifest/record Keeping practiced by the applicant.**  
NA

34.

**Details of self-monitoring (source and environment system)**  
NA

35.

**Are you using any imported hazardous waste. If yes, give details.**

  
**Principal**

Dharti Ayurved College & R.I.  
At.Pohetakli Tq.Pathri Dist.Parbhani.

NA

36.

**Copy of actual user Registration/certificate obtained from State Pollution Control Board/Ministry of Environment & Forests, Government of India, for use of hazardous waste.**

NA

37.

**Present treatment of hazardous waste, if any (give type and capacity of treatment units)**

NA

38. Quantity of hazardous waste disposal

**(i) Within factory**

0

**(ii) Outside the factory (specify location and enclose copies of agreement.)**

0

**(iii) Through sale (enclosed documentary proof and copies of agreement.)**

0

**(iv) Outside state/Union Territory, if yes particulars of (1 & 3 ) above.**

0

**(v) Other (Specify)**

0

**Part - E: Additional information**

39.

**a. Do you have any proposals to upgrade the present system for treatment and disposal of effluent/emissions and/or hazardous waste.**

YES

**b. If yes, give the details with time- schedule for the implementation and approximate expenditure to be incurred on it.**

JUN2026

40.

**Capital and recurring (O & M) expenditure on various aspect of environment protection such as effluent, emission, hazardous waste, solid waste, tree- plantation, monitoring, data acquisition etc. (give figures separately for items implemented/to be implemented).**

5 LAKH

41.

**To which of the pollution control equipment, separate meters for recording consumption of electric energy are installed ?**

YES

42.

**Which of the pollution control items are connected to D.G. Set (captive power source) to ensure their running in the event of normal power failure**

NA

**Principal**

Dharti Ayurved College & R.I.  
At.Pohetaki To.Pathri Dist.Parbhani.

43. Nature, quantity and method of disposal of non- hazardous solid waste generated separately from the process of manufacture and waste treatment. (Give details of area/capacity available in applicant's land)

Type	Quantity	UOM	Treatment	Disposal	Other Details
NA	0	--NA--	NA	NA	NA

44. Hazardous Chemicals - Give details of Chemicals and quantities handled and Stored.

**(i) Is the unit a Major Accident Hazard unit as per Mfg.Storage Import Hazardous Chemicals Rules ?**

NA

**(ii) Is the unit an isolated storage as defined under the MSIHC Rules ?**

NA

**(iii) Indicate status of compliance of Rules 5,7,10,11,12,13 and 18 of the MSIHC Rules.**

NA

**(iv) Has approval of site been obtained from the concerned authority?**

NA

**(v) Has the unit prepared an off-site Emergency Plan? Is it updated ?**

NA

**(vi) Has information on imports of Chemicals been provided to the concerned authority?**

NA

**(vii) Does the unit possess a policy under the PLI Act?**

NA

45. Brief details of tree plantation/green belt development within applicant's premises ( in hectors )

Open Space Availability	Plantation Done On	Number of Trees Planted
7289.75 Square meter	3255.20 Square meter(45 %)	235

46.

**Information of schemes for waste Minimization, resource recovery and recycling - implemented and to be implemented, separately.**

NA

47.

**(a) The applicant shall indicate whether Industry comes under Public Hearing, if so, the relevant documents such as EIA, EMP, Risk Analysis etc. shall be submitted, if so, the relevant documents enclosed shall be indicated accordingly.**

NA

**(b) Any other additional information that the applicants desires to give**

NA

**(c) Whether Environmental Statement submitted ? If submitted, give date of submission.**

NA

48.

**I/We further declare that the information furnished above is correct to the best of my/our knowledge.**

49.

**I/We hereby submit that in case of any change from what is stated in this application in respect of raw materials, products, process of manufacture and treatment and/or disposal of effluent, emission, hazardous wastes etc. In quality and quantity; a fresh application for Consent/Authorization shall be made and until the grant of fresh Consent/Authorization no change shall be made.**

  
Principal

Charti Ayurved College & R.I.  
At.Pohetakli Tq.Pathri Dist.Parbhani.

50.

I/We undertake to furnish any other information within one month of its being called by the Board

Yours faithfully

Signature :

Name :

Designation :

**Additional Information**

**Air Pollution**

Sr No.	Air Pollution Source	Pollutants	APCS Provided	Remark
1	DG	Particulate Matter	Yes	NA

<b>Separate EM Provided</b>	No	<b>Other Emission Sources</b>	NA
<b>Measures Proposed</b>	NA	<b>Foul Smell Coming Out</b>	No
<b>Air Sampling Facility Details</b>	YES		

**D.G. Set Details**

Description	Capacity(KVA)	Remarks
DG Set	25	NA

**Hazardous Waste Generation**

Hazardous Waste	Quantity	UOM	Treatment	Disposal	Other Details
-----------------	----------	-----	-----------	----------	---------------

**CHWTSDF Details**

Member of CHWTSDF	CHWTSDF Name	Remarks
-------------------	--------------	---------

**Cess Details**

<b>Cess Applicable</b>	<b>Cess Paid</b>	<b>If Yes, UpTo</b>
No	No	Jan 1 1900 12:00:00:000AM

**Legal Actions**

Legal Action Taken	Legal Record Of Company	Legal Action Details	Remarks
No			

Bank Guarantee Applicable:

No

  
Principal  
Dharti Ayurved College & R.I.  
At.Pohetakli Tq.Pathri Dist.Parbhani.

## Annêxure

### Environment Clearance

<b>Date</b>	<b>Project Details</b>	<b>Capital Investment(Crs.)</b>	<b>Total Plot area(sq. mtrs.)</b>	<b>Total Built up area(sq. mtrs.)</b>	<b>Amendment/Extension</b>
Jan 1, 1970		0	0	0	



**Principal**

Dharti Ayurved College & R.I.  
At,Pohetakli Tq.Pathri Dist.Parbhani.