



राष्ट्रीय राजधानी क्षेत्र और निकटवर्ती क्षेत्र
वायु गुणवत्ता प्रबंधन आयोग
Commission for Air Quality Management in
National Capital Region and
Adjoining Areas



Date:

PROFORMA**1. Name of Organization:****2. Address of Organization (must indicate Telephone No., Fax, and e-mail address):****3. Type of Organization:**

(Select one out of these: University /Research Institute/
Laboratory/ NGO/ Regulatory Body/ Industry/ Others)

4. Detail of Expert Member**Name:****Designation:****Contact No:****Email Address:****Complete Postal Address:****Field of Specialization:****5. Field of Research and Expertise (Tick mark the field in which institute is doing Research/Development activities)**

- A. Air Quality Monitoring/Emission Measurement
- B. Dispersion Modelling
- C. Receptor Modelling
- D. Regulatory Modelling
- E. Source Apportionment/Emission Inventory
- F. Transport Emissions
- G. Industrial Emissions/Process Emissions
- H. Combustion Emissions (Agricultural Stubble Burning, Municipal Solid Waste Burning, biomass burning etc.)
- I. Emission from C&D activities
- J. Dust from Roads & Open Areas
- K. Impact of Air Pollution on Health

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- L. Air Pollution Control Devices
- M. Meteorology
- N. Modelling and Forecasting of Air Pollution
- O. Others

6. Other Details, if any, with regard to the work on Air Pollution (in 200-300 words only):

7. Details/ List of Weblinks for five major work/research/assignment carried out in the field of Air Pollution:

**Head of the Institution/Department
(Signature & Seal)**