



CRYSTALLINE CLEANING & ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18423

CUSTOMER:			CONTACT PERSON: Mr. Rajesh		
SITE DETAILS: Dubai Landou Hasibat			CONTACT NO: 0564048843		
TANK DETAILS: facth (2) tank clean			LOCATION DETAILS: Jumeirah Dubai		
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input checked="" type="checkbox"/> GRP PANEL	<input type="checkbox"/> FRP TANK	<input type="checkbox"/> GALVANIZED	<input type="checkbox"/> STEEL PANEL	<input type="checkbox"/> PLASTIC
<input type="checkbox"/> CONCRETE COATED		<input type="checkbox"/> POLYURETHANE	<input type="checkbox"/> OTHERS		
SIZE OF TANK			QUANTITY OF WATER		
M3	USG	L*B*H	<input checked="" type="checkbox"/> FULL	<input type="checkbox"/> HALF	<input type="checkbox"/> EMPTY
CONDITION OF WATER TANK BEFORE CLEANING			CONDITION OF WATER TANK AFTER CLEANING		
<input type="checkbox"/> CLEAN	<input type="checkbox"/> DIRTY	<input checked="" type="checkbox"/> VERY DIRTY	<input checked="" type="checkbox"/> CLEAN	<input type="checkbox"/> DIRTY	<input type="checkbox"/> VERY DIRTY
<input type="checkbox"/> BIOFILMS	<input type="checkbox"/> MOULDS	<input type="checkbox"/> SLIME	<input type="checkbox"/> BIOFILMS	<input type="checkbox"/> MOULDS	<input type="checkbox"/> SLIME
<input type="checkbox"/> SEDIMENTS	<input type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST	<input type="checkbox"/> SEDIMENTS	<input type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST
ACCESS		MANHOLE		<input type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED <input type="checkbox"/> NA
LADDER IN		LADDER OUT		LEAKS	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	DRAIN LINE	
TANK CLEANED		TANK DISINFECTED		VALVES	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	PIPE DISINFECTED	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		27-04-2021		26-10-2021	
CHEMICALS & EQUIPMENTS USED					

1. _____	Quantity _____
2. _____	Quantity _____
<input checked="" type="checkbox"/> Submersibel Pump <input type="checkbox"/> High/Low Pressure Jet <input type="checkbox"/> Extension Cords <input type="checkbox"/> LED lights <input type="checkbox"/> Foot Bath <input type="checkbox"/> Ladder <input type="checkbox"/> Ventilating Fan <input checked="" type="checkbox"/> Suction/Discharge Hoses <input type="checkbox"/> Oxygen Meter <input type="checkbox"/> Vacuum Cleaner <input type="checkbox"/> Cleaning Materials	

COMMENTS AND RECOMMENDATION:

Crystalline representative: _____ Signature:

Customer/Customer representative: _____ Signature: