



CRYSTALLINE CLEANING & ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18434

CUSTOMER:			CONTACT PERSON: <i>M/S - winny</i>		
SITE DETAILS: <i>Manasa - Food Processing</i>			CONTACT NO: 056-1796668 <i>056-1796668</i>		
TANK DETAILS: <i>2) tank 6000 USG</i>			LOCATION DETAILS: <i>DIP- I</i>		
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> OTHERS					
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input 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 checked="" type="checkbox"/> POLYURETHANE	<input type="checkbox"/> OTHERS		
SIZE OF TANK			QUANTITY OF WATER		
M3	USG	L*B*H	<input type="checkbox"/> FULL	<input checked="" type="checkbox"/> HALF	<input type="checkbox"/> EMPTY
CONDITION OF WATER TANK BEFORE CLEANING			CONDITION OF WATER TANK AFTER CLEANING		
<input type="checkbox"/> CLEAN	<input checked="" type="checkbox"/> DIRTY	<input 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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input 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"/> NA		
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<i>21-05-2021</i>		<i>20-11-2021</i>	
CHEMICALS & EQUIPMENTS USED					
1. _____ Quantity _____					
2. _____ Quantity _____					
<input checked="" type="checkbox"/> Submersibel Pump <input checked="" type="checkbox"/> High/Low Pressure Jet <input checked="" type="checkbox"/> Extension Cords <input checked="" type="checkbox"/> LED lights <input type="checkbox"/> Foot Bath <input type="checkbox"/> Ladder					
<input checked="" type="checkbox"/> Ventilating Fan <input 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:	