

# WATER TANK CLEANING & DISINFECTION COMPLETION REPORT

FOR



Client : AL REEM HOSPICO COMPANY  
Contact Person: Mr. Abin Koshy Varghese.  
Mechanical Engineer  
Site Details : Al Ain Hospital, Al Ain, UAE.  
Date : 30 September 2018



**CRYSTALLINE**  
ENVIRONMENTAL SERVICES

CRYSTALLINE ENVIRONMENTAL  
SERVICES

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# CRYSTALLINE ENVIRONMENTAL SERVICES

## WATER TANK - AFTER SERVICE REPORT

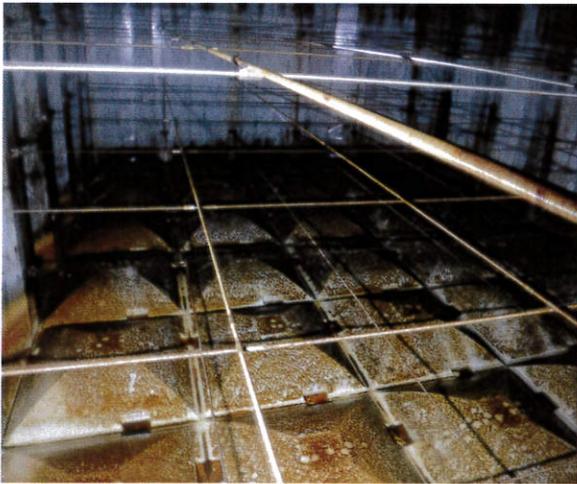
20187

CUSTOMER: ALAIN HOSPITAL			CONTACT PERSON: MR ABIN		
SITE DETAILS: ALAIN			CONTACT NO:		
TANK DETAILS: G.R.P. WATER TANK 01			LOCATION DETAILS: GROUND		
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
<b>TYPE OF TANK</b>					
<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 type="checkbox"/> POLYURETHANE	<input type="checkbox"/> OTHERS		
<b>SIZE OF TANK</b>			<b>QUANTITY OF WATER</b>		
M3	USG	L*B*H	<input type="checkbox"/> FULL	<input type="checkbox"/> HALF	<input type="checkbox"/> EMPTY
<b>CONDITION OF WATER TANK BEFORE CLEANING</b>			<b>CONDITION OF WATER TANK AFTER CLEANING</b>		
<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 checked="" type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST	<input type="checkbox"/> SEDIMENTS	<input type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST
<b>ACCESS</b>		<b>MANHOLE</b>	<input checked="" type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED	<input type="checkbox"/> NA
<b>LADDER IN</b>	<b>LADDER OUT</b>	<b>LEAKS</b>	<b>DRAIN LINE</b>	<b>VALVES</b>	<b>FLOAT VALVE</b>
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>TANK CLEANED</b>		<b>TANK DISINFECTED</b>		<b>PIPES DISINFECTED</b>	
<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 checked="" type="checkbox"/> NA
<b>LAST CLEANING DATE</b>		<b>CURRENT CLEANING DATE</b>		<b>NEXT CLEANING DATE</b>	
		20/09/2018		20/03/2019	
<b>CHEMICALS &amp; EQUIPMENTS USED</b>					
1. <u>Caustic Bio Ph</u> Quantity <u>225RS</u>					
2. _____ Quantity _____					
<input checked="" type="checkbox"/> Submersible Pump <input checked="" type="checkbox"/> High/Low Pressure jet <input checked="" type="checkbox"/> Extension Cords <input checked="" type="checkbox"/> LED Lights <input checked="" type="checkbox"/> Foot Bath <input checked="" type="checkbox"/> Ladder <input checked="" type="checkbox"/> Ventilating Fan <input checked="" type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
<b>COMMENTS &amp; RECOMMENDATIONS:</b> Above mentioned water tank is cleaned & disinfected					
Crystalline Representative: <u>Musliq</u>			Signature: <u>[Signature]</u>		

DATE OF CLEANING: 20-09-2018

**PHOTOGRAPHS**  
**GROUND LEVEL GRP WATER TANK- 01**

**BEFORE**



**AFTER**



**CLEANER WATER GREENER TOMORROW**



# CRYSTALLINE ENVIRONMENTAL SERVICES

## WATER TANK - AFTER SERVICE REPORT

20186

CUSTOMER: AL AIN HOSPITAL			CONTACT PERSON: MR ABIN		
SITE DETAILS: AL AIN			CONTACT NO: 0569163260		
TANK DETAILS: G.R.P. WATER TANK NO 03			LOCATION DETAILS: Ground		
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
<b>TYPE OF TANK</b>					
<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 type="checkbox"/> POLYURETHANE	<input type="checkbox"/> OTHERS		
<b>SIZE OF TANK</b>			<b>QUANTITY OF WATER</b>		
M3	USG	L*B*H	<input type="checkbox"/> FULL	<input type="checkbox"/> HALF	<input type="checkbox"/> EMPTY
<b>CONDITION OF WATER TANK BEFORE CLEANING</b>			<b>CONDITION OF WATER TANK AFTER CLEANING</b>		
<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 checked="" type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST	<input type="checkbox"/> SEDIMENTS	<input type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST
<b>ACCESS</b>		<b>MANHOLE</b>		<input checked="" type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED
<input type="checkbox"/> NA	<input type="checkbox"/> NA	<input type="checkbox"/> NA		<input type="checkbox"/> NA	<input type="checkbox"/> NA
<b>LADDER IN</b>	<b>LADDER OUT</b>	<b>LEAKS</b>	<b>DRAIN LINE</b>	<b>VALVES</b>	<b>FLOAT VALVE</b>
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>TANK CLEANED</b>		<b>TANK DISINFECTED</b>		<b>PIPES DISINFECTED</b>	
<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 checked="" type="checkbox"/> NA
<b>LAST CLEANING DATE</b>		<b>CURRENT CLEANING DATE</b>		<b>NEXT CLEANING DATE</b>	
		20/09/2018		20/03/2019	
<b>CHEMICALS &amp; EQUIPMENTS USED</b>					
1. <u>Carbo Bio Plus</u> Quantity <u>2 LTR</u>					
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 checked="" type="checkbox"/> Foot Bath <input checked="" type="checkbox"/> Ladder					
<input checked="" type="checkbox"/> Ventilating Fan <input checked="" type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Mater <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
<b>COMMENTS &amp; RECOMMENDATIONS:</b> Above mentioned water tank are cleaned & Disinfected					
Crystalline Representative: <u>Muhammad</u>			Signature: <u>[Signature]</u>		

DATE OF CLEANING: 20-09-2018

**PHOTOGRAPHS**  
**GROUND LEVEL GRP WATER TANK- 03**

**BEFORE**



**AFTER**



**CLEANER WATER GREENER TOMORROW**



# CRYSTALLINE ENVIRONMENTAL SERVICES

## WATER TANK - AFTER SERVICE REPORT

20195

CUSTOMER: <u>AL AIN HOSPITAL</u>			CONTACT PERSON: <u>MR ABIM</u>		
SITE DETAILS: <u>HOSPITAL</u> <u>AL AIN</u>			CONTACT NO: <u>0569163260</u>		
TANK DETAILS: <u>G.R.P. WATER TANK</u>			LOCATION DETAILS: <u>GROUND LEVEL</u>		
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
<b>TYPE OF TANK</b>					
<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 type="checkbox"/> POLYURETHANE	<input type="checkbox"/> OTHERS		
<b>SIZE OF TANK</b>			<b>QUANTITY OF WATER</b>		
M3	USG	L*B*H	<input type="checkbox"/> FULL	<input type="checkbox"/> HALF	<input type="checkbox"/> EMPTY
<b>CONDITION OF WATER TANK BEFORE CLEANING</b>			<b>CONDITION OF WATER TANK AFTER CLEANING</b>		
<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 checked="" type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST	<input type="checkbox"/> SEDIMENTS	<input type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST
<b>ACCESS</b>		<b>MANHOLE</b>	<input checked="" type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED	<input type="checkbox"/> NA
<b>LADDER IN</b>	<b>LADDER OUT</b>	<b>LEAKS</b>	<b>DRAIN LINE</b>	<b>VALVES</b>	<b>FLOAT VALVE</b>
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>TANK CLEANED</b>		<b>TANK DISINFECTED</b>		<b>PIPES DISINFECTED</b>	
<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 checked="" type="checkbox"/> NA
<b>LAST CLEANING DATE</b>		<b>CURRENT CLEANING DATE</b>		<b>NEXT CLEANING DATE</b>	
		<u>26/09/2018</u>		<u>26/03/2019</u>	
<b>CHEMICALS &amp; EQUIPMENTS USED</b>					
1. <u>Penk Bio Plu</u> Quantity <u>2 LTR</u> <u>2 LTR</u>					
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 checked="" type="checkbox"/> Foot Bath <input checked="" type="checkbox"/> Ladder <input checked="" type="checkbox"/> Ventilating Fan <input checked="" type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Mater <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
<b>COMMENTS &amp; RECOMMENDATIONS:</b> <u>Above mentioned water tank are cleaned &amp; Disinfected</u>					
Crystalline Representative: <u>Mustafa</u>			Signature: <u>[Signature]</u>		



**CRYSTALLINE**  
ENVIRONMENTAL SERVICES

DATE OF CLEANING: 26-09-2018

**PHOTOGRAPHS**  
**GROUND LEVEL GRP WATER TANK- 04**

**BEFORE**



**AFTER**



**CLEANER WATER GREENER TOMORROW**



# CRYSTALLINE ENVIRONMENTAL SERVICES

## WATER TANK - AFTER SERVICE REPORT

20196

CUSTOMER: ALAM HOSPITAL			CONTACT PERSON: MR ABLOV		
SITE DETAILS: HOSPITAL ALAM			CONTACT NO: 0569163260		
TANK DETAILS: C.R.P. WATER TANK			LOCATION DETAILS: 8 ROUNDS		
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
<b>TYPE OF TANK</b>					
<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 type="checkbox"/> POLYURETHANE	<input type="checkbox"/> OTHERS			
<b>SIZE OF TANK</b>			<b>QUANTITY OF WATER</b>		
M3	USG	L*B*H	<input type="checkbox"/> FULL	<input type="checkbox"/> HALF	<input type="checkbox"/> EMPTY
<b>CONDITION OF WATER TANK BEFORE CLEANING</b>			<b>CONDITION OF WATER TANK AFTER CLEANING</b>		
<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 checked="" type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST	<input type="checkbox"/> SEDIMENTS	<input type="checkbox"/> MUD & SAND	<input type="checkbox"/> RUST
<b>ACCESS</b>		<b>MANHOLE</b>		<input checked="" type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED <input type="checkbox"/> NA
<b>LADDER IN</b>	<b>LADDER OUT</b>	<b>LEAKS</b>	<b>DRAIN LINE</b>	<b>VALVES</b>	<b>FLOAT VALVE</b>
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>TANK CLEANED</b>		<b>TANK DISINFECTED</b>		<b>PIPES DISINFECTED</b>	
<input 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	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
<b>LAST CLEANING DATE</b>		<b>CURRENT CLEANING DATE</b>		<b>NEXT CLEANING DATE</b>	
		26/09/2018		20/03/2019	
<b>CHEMICALS &amp; EQUIPMENTS USED</b>					
1. <u>Caustic Bio</u> Quantity <u>2 LTR</u>					
2. _____ Quantity _____					
<input checked="" type="checkbox"/> Submersible Pump <input checked="" type="checkbox"/> High/Low Pressure jet <input checked="" type="checkbox"/> Extension Cords <input checked="" type="checkbox"/> LED Lights <input checked="" type="checkbox"/> Foot Bath <input checked="" type="checkbox"/> Ladder <input checked="" type="checkbox"/> Ventilating Fan <input checked="" type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
<b>COMMENTS &amp; RECOMMENDATIONS:</b> Above mentioned water tank are cleaned & disinfected					
Crystalline Representative: <u>Mustafa</u>			Signature: <u>[Signature]</u>		



DATE OF CLEANING: 26-09-2018

**PHOTOGRAPHS**  
**GROUND LEVEL GRP WATERTANK- 02**

**BEFORE**



**AFTER**



# CRYSTALLINE CLEANING & ENVIRONMENTAL SERVICES

## CLEANING & DISINFECTION CERTIFICATE

### POTABLE WATER TANKS

CLIENT NAME : AL REEM HOSPICO COMPANY LLC.

CLIENT ADDRESS : P.O. BOX: 81379, AL AIN, ABU DHABI.

CONTACT PERSON : MR. ABIN KOSHY VARGHESE.

SITE DETAILS : AL AIN HOSPITAL, AL AIN, UAE.

DETAILS : WATER TANK CLEANING

DATE OF CLEANING : SEPTEMBER 2018

FREQUENCY OF CLEANING : EVERY YEAR

DATE OF NEXT CLEANING : SEPTEMBER 2019

*The procedures employed in this cleaning and disinfection comply with HS (G) 70 health and safety guidelines for prevention of legionella as well as BS6700 and CARELA BIO PLUS method statement.*

*The entire water storage tank should be cleaned and disinfected minimum every six (6) months depending upon the condition.*



CRYSTALLINE CLEANING AND ENVIRONMENTAL SERVICES