

**ENVIRONMENTAL
SERVICES FOR
A GREENER
TOMORROW...
ONE STEP AT
A TIME.**



CRYSTALLINE
ENVIRONMENTAL SERVICES



Completion Report for

Water Tank Cleaning & Disinfection

Date: **10 June 2020**
Client Name: **Etisalat Facilities Management**
Contact Person: **Mr.Percival Gallardo Libunao**
Designation: **HVAC & Mechanical Engineer**
Site Detail: **Zayed Military Hospital - Abu Dhabi**





CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17035

CUSTOMER: <u>Etisalat Facilities management</u>			CONTACT PERSON: <u>Mounth</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 9927404</u>		
TANK DETAILS: <u>R.C.C -1 building-35</u>			LOCATION DETAILS: <u>Boiler Room Rooftop</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL			<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS
TYPE OF TANK					
<input checked="" 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			
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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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 <input type="checkbox"/> NA
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>18-05-2020</u>		<u>18-11-2020</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>500ML</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 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					
COMMENTS AND RECOMMENDATION:					
<u>Water Tank Disinfection</u>					
Crystalline representative: <u>madesh</u>			Signature: <u>madesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17036

CUSTOMER: Etisalat Facilities management			CONTACT PERSON: moorthi		
SITE DETAILS: Jayed military Hospital			CONTACT NO: 0549967404		
TANK DETAILS: A.C.C - 2 building 35			LOCATION DETAILS: Boiler Room Rooftop		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
TYPE OF TANK					
<input checked="" 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			
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	DRAIN LINE	VALVES	FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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 <input type="checkbox"/> NA
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		19-05-20		19-11-20	
CHEMICALS & EQUIPMENTS USED					
1. careta bio plus Quantity 500 ml					
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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
Water Tank Disinfection					
Crystalline representative: mahesh			Signature:		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17037

CUSTOMER: <u>Ebisalat Facilities management</u>			CONTACT PERSON: <u>mooarthi</u>		
SITE DETAILS: <u>2nd military Hospital</u>			CONTACT NO: <u>0549967404</u>		
TANK DETAILS: <u>SEMTEX - Ground level</u>			LOCATION DETAILS: <u>Public health Division</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input 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 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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"/> NA	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>20-05-20</u>		<u>20-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>150 ml</u>					
2. _____ Quantity _____					
<input checked="" type="checkbox"/> Submersible Pump <input 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 checked="" type="checkbox"/> Suction/Discharge Hoses <input type="checkbox"/> Oxygen Meter <input type="checkbox"/> Vacuum Cleaner <input type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water tank Disinfection</u>					
Crystalline representative: <u>makesh</u>				Signature: <u>makesh</u>	
Customer/Customer representative:				Signature:	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17038

CUSTOMER: Etisalat Facilities management			CONTACT PERSON: Maarthi		
SITE DETAILS: Zayed military Hospital			CONTACT NO: 0549967404		
TANK DETAILS: F.R.P Water Tank-1			LOCATION DETAILS: Nursing School (Roof top)		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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"/> NA
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		20-05-20		20-11-20	
CHEMICALS & EQUIPMENTS USED					
1. Carela bio plus Quantity 100 ml					
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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
Water Tanks Disinfection					
Crystalline representative: mahesh			Signature:		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17039

CUSTOMER: <u>Edisalat Facilities management</u>			CONTACT PERSON: <u>Moonthi</u>		
SITE DETAILS: <u>Jaded military hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>F.R.P water tank - 2</u>			LOCATION DETAILS: <u>Nursing School Road</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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"/> LADDER IN		<input type="checkbox"/> LADDER OUT		<input type="checkbox"/> DAMAGED	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> NA	
LADDER IN		LADDER OUT		LEAKS	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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"/> NA	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>20-05-20</u>		<u>20-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>100 ml</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 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 type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water tank Disinfection</u>					
Crystalline representative: <u>makesh</u>				Signature: <u>[Signature]</u>	
Customer/Customer representative:				Signature:	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17040

CUSTOMER: Etisalat Facilities management			CONTACT PERSON: Moorthi		
SITE DETAILS: Jayed military Hospital			CONTACT NO: 0549967404		
TANK DETAILS: F.R.P Water Tank -03			LOCATION DETAILS: Nursing School Roof top		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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"/> NA
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		20-05-20		20-11-20	
CHEMICALS & EQUIPMENTS USED					
1. Carela bio plus Quantity 100 ml					
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 checked="" type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
Water Tank Disinfection					
Crystalline representative: mubesh			Signature:		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17042

CUSTOMER: Etisalat Facilities management			CONTACT PERSON: masrhi		
SITE DETAILS: Zayed military Hospital			CONTACT NO: 054-9967404		
TANK DETAILS: SERTEM water tank			LOCATION DETAILS: Nursing School Road TOP		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input 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 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		20-05-2020		20-11-20	
CHEMICALS & EQUIPMENTS USED					
1. Carela bio plus Quantity 150 ml					
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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
Water Tank Disinfection					
Crystalline representative: makesh			Signature:		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17043

CUSTOMER: <u>Etisalat Facilities management</u>			CONTACT PERSON: <u>Moorthi</u>		
SITE DETAILS: <u>Layed military Hospital</u>			CONTACT NO: <u>0549967404</u>		
TANK DETAILS: <u>SENTEX H water tank-1</u>			LOCATION DETAILS: <u>Nursing Accommodation Rooftop</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input 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 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>21-05-20</u>		<u>21-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>Carela bio Plus</u> Quantity <u>150 ml</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 type="checkbox"/> Oxygen Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water-tank Disinfection</u>					
Crystalline representative: <u>makesh</u>			Signature: <u>[Signature]</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17044

CUSTOMER: <u>Etisalat Facilities management</u>			CONTACT PERSON: <u>moorthi</u>		
SITE DETAILS: <u>zayed military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>SENTECH water tank - 2</u>			LOCATION DETAILS: <u>nursing Accommodation Rooftop</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input 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 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 checked="" 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	
DRAIN LINE		VALVES		FLOAT VALVE	
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>21-05-2020</u>		<u>21-11-2020</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>150 ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water tank Disinfection</u>					
Crystalline representative: <u>mahesh</u>			Signature: <u>[Signature]</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17045

CUSTOMER: <u>Elisalat Facilities management</u>			CONTACT PERSON: <u>Maarthi</u>		
SITE DETAILS: <u>Jaded military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>SEWAGE water tank - 2</u>			LOCATION DETAILS: <u>main Hospital Roof Top</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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
<u>LADDER IN</u>	<u>LADDER OUT</u>	<u>LEAKS</u>	<u>DRAIN LINE</u>	<u>VALVES</u>	<u>FLOAT VALVE</u>
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>21-05-2020</u>		<u>21-11-2020</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>Corona Bio Plus</u> Quantity <u>150 ml</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 type="checkbox"/> Foot Bath <input checked="" type="checkbox"/> Ladder					
<input checked="" type="checkbox"/> Ventilating Fan <input type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water Tank Disinfection</u>					
Crystalline representative: <u>malesh</u>				Signature: <u>Maarthi</u>	
Customer/Customer representative:				Signature:	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17047

CUSTOMER: Etisalat Facilities management			CONTACT PERSON: moorthi		
SITE DETAILS: Jaded military Hospital			CONTACT NO: 054 996 7404		
TANK DETAILS: G.R.P Water Tanks-1			LOCATION DETAILS: Solidex Accommodation Rooftop		
TYPE OF BUILDING: <input checked="" 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 checked="" type="checkbox"/> MUD & SAND	<input checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		02-06-20		02-12-20	
CHEMICALS & EQUIPMENTS USED					
1. Carela bio plus Quantity 150ml					
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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
.water tank cleaning and disinfection					
Crystalline representative: <u>makesh</u>				Signature: <u>[Signature]</u>	
Customer/Customer representative:				Signature:	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17048

CUSTOMER: <u>Etisalat Facilities manager</u>			CONTACT PERSON: <u>manithi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>G.R.P Water Tank-2</u>			LOCATION DETAILS: <u>Solider Accommodation Road Top</u>		
TYPE OF BUILDING: <input checked="" 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>02-06-20</u>		<u>02-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>150ml</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 type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaned and disinfection</u>					
Crystalline representative: <u>mahesh</u>				Signature: _____	
Customer/Customer representative: _____				Signature: _____	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18105

CUSTOMER: <u>Edisulal Facilities management</u>			CONTACT PERSON: <u>Moozhi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>0549967404</u>		
TANK DETAILS: <u>Gr.P.P Water tank -1</u>			LOCATION DETAILS: <u>officers residence Rooftop</u>		
TYPE OF BUILDING: <input checked="" 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 checked="" 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	<input type="checkbox"/> NA	<input type="checkbox"/> NA	<input type="checkbox"/> NA	<input type="checkbox"/> NA	<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>27-05-20</u>		<u>27-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>250 ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaning and disinfection</u>					
Crystalline representative: <u>maha</u>			Signature: <u>maha</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18106

CUSTOMER: <u>Etisalat Facilities management</u>			CONTACT PERSON: <u>moorthi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 8867404</u>		
TANK DETAILS: <u>G.R.P water tank-2</u>			LOCATION DETAILS: <u>office resource Roof top</u>		
TYPE OF BUILDING: <input checked="" 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>27-05-20</u>		<u>27-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>casela bio plus</u> Quantity <u>150 ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water Tank cleaning and Disinfection</u>					
Crystalline representative: <u>mahesh</u>			Signature: <u>mahesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18107

CUSTOMER: Etisalat Facilities management			CONTACT PERSON: moorthi		
SITE DETAILS: Zayed military Hospital			CONTACT NO: 054 9967404		
TANK DETAILS: G.R.P water tank - 3			LOCATION DETAILS: office reserve Rooftop		
TYPE OF BUILDING: <input checked="" 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 checked="" 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"/> LADDER IN	<input type="checkbox"/> LADDER OUT	<input type="checkbox"/> LEAKS	<input type="checkbox"/> DRAIN LINE	<input type="checkbox"/> VALVES	<input type="checkbox"/> FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		27-05-20		27-11-20	
CHEMICALS & EQUIPMENTS USED					
1. Carela bio plus Quantity 150 ml					
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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
Water Tank cleaning and Disinfection					
Crystalline representative: makesh			Signature: <i>makesh</i>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18108

CUSTOMER: <u>EtiSalat Facilities management</u>			CONTACT PERSON: <u>moshi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 996 7104</u>		
TANK DETAILS: <u>SENTECH WATER TANK</u>			LOCATION DETAILS: <u>office resource ROOFTOP</u>		
TYPE OF BUILDING: <input checked="" 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 checked="" 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 checked="" type="checkbox"/> NO	
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>27-05-20</u>		<u>27-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>Carela bio plus</u> Quantity <u>100 ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water tank cleaning and disinfection</u>					
Crystalline representative: <u>mesh</u>				Signature: <u>mesh</u>	
Customer/Customer representative:				Signature:	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18109

CUSTOMER: <u>Elisabet Facilities management</u>			CONTACT PERSON: <u>martha</u>		
SITE DETAILS: <u>2nd military hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>G.R.P water tank - 1</u>			LOCATION DETAILS: <u>N.C.U building rooftop</u>		
TYPE OF BUILDING: <input checked="" 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		
<input type="checkbox"/> M3	<input type="checkbox"/> USG	<input type="checkbox"/> 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>28-05-20</u>		<u>28-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>150ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaning and disinfection</u>					
Crystalline representative: <u>madesh</u>			Signature: <u>madesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18110

CUSTOMER: <u>Etisalat Facilities management</u>			CONTACT PERSON: <u>masrithi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>G.R.P. W.TANK - 2</u>			LOCATION DETAILS: <u>M.C.U. building Rooftop</u>		
TYPE OF BUILDING: <input checked="" 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>28-05-20</u>		<u>28-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>Carela bio plus</u> Quantity <u>250 ml</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 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					
COMMENTS AND RECOMMENDATION:					
<u>.water tank cleaning and Disinfection</u>					
Crystalline representative: <u>makesh</u>			Signature: <u>makesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18111

CUSTOMER: <u>Etisalat Facilitate managemnt</u>			CONTACT PERSON: <u>moorthi</u>		
SITE DETAILS: <u>2nd military Hospital</u>			CONTACT NO: <u>054 8967404</u>		
TANK DETAILS: <u>G.R.P Water Tank - 03</u>			LOCATION DETAILS: <u>M.C.U building Rooftop</u>		
TYPE OF BUILDING: <input checked="" 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 checked="" 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 checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DRAIN LINE	
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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 type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> NA
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>28-05-20</u>		<u>28-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carelex bio plus</u> Quantity <u>150 ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>water tanks cleaning and Disinfection</u>					
Crystalline representative: <u>mesh</u>			Signature: <u>mesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18112

CUSTOMER: <u>E. Z. Salet Facilities management</u>			CONTACT PERSON: <u>moorthi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>G.R.P Wu Tank - 4</u>			LOCATION DETAILS: <u>M.C.U building Roof top</u>		
TYPE OF BUILDING: <input checked="" 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 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 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 checked="" 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"/> LADDER IN	<input type="checkbox"/> LADDER OUT	<input type="checkbox"/> LEAKS	<input type="checkbox"/> DRAIN LINE	<input type="checkbox"/> VALVES	<input type="checkbox"/> FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>28-05-20</u>		<u>28-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>150 ml</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 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	
COMMENTS AND RECOMMENDATION:					
<u>Water Tank cleaning and disinfection</u>					
Crystalline representative: <u>mahesh</u>			Signature: <u>Mahesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18113

CUSTOMER: <u>Ezizalot military hospital</u>			CONTACT PERSON: <u>moorathi</u>		
SITE DETAILS: <u>Zayed military hospital</u>			CONTACT NO: <u>054 896 7404</u>		
TANK DETAILS: <u>F.A.P water tank - 1</u>			LOCATION DETAILS: <u>P.M.S building rooftop</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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 checked="" type="checkbox"/> NO	
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>21-05-20</u>		<u>21-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>100 ml</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 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					
COMMENTS AND RECOMMENDATION:					
<u>Water tank cleaning and Disinfection</u>					
Crystalline representative: <u>mahesh</u>			Signature: <u>mahesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18114

CUSTOMER: <u>Etisalat Facilities manager</u>			CONTACT PERSON: <u>marathi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 996 7104</u>		
TANK DETAILS: <u>F.R.P. WWTank-2</u>			LOCATION DETAILS: <u>D.m.s building rooftop</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>21-05-20</u>		<u>21-11-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>200ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water tank cleaning and Disinfection</u>					
Crystalline representative: <u>mahesh</u>			Signature: <u>marathi</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18115

CUSTOMER: <u>Ezi Salat F/m</u>			CONTACT PERSON: <u>maurthi</u>		
SITE DETAILS: <u>Zaid Military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>F.R.P w/Tank-3</u>			LOCATION DETAILS: <u>D.M.S building Rooftop</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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	DRAIN LINE	VALVES	FLOAT VALVE
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>02-06-20</u>		<u>02-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio PLUS</u> Quantity <u>100ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaning and Disinfection</u>					
Crystalline representative: <u>malesh</u>			Signature: _____		
Customer/Customer representative: _____			Signature: _____		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18118

CUSTOMER: Etisalat F/m			CONTACT PERSON: moath		
SITE DETAILS: Zayed military hospital			CONTACT NO: 054 886 7404		
TANK DETAILS: F.R.P water tank			LOCATION DETAILS: Genetic building Rooftop		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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"/> LADDER IN	<input type="checkbox"/> LADDER OUT	<input type="checkbox"/> LEAKS	<input type="checkbox"/> DRAIN LINE	<input type="checkbox"/> VALVES	<input type="checkbox"/> FLOAT VALVE
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		03-06-20		03-12-20	
CHEMICALS & EQUIPMENTS USED					
1. Carela bio plus Quantity 200 ml					
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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
water tank cleaning and disinfection					
Crystalline representative: makesh			Signature: _____		
Customer/Customer representative: _____			Signature: _____		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18119

CUSTOMER: Etisalat F/m			CONTACT PERSON: moath		
SITE DETAILS: Zayed military hospital			CONTACT NO: 054 99872404		
TANK DETAILS: G.R.P water Tank			LOCATION DETAILS: Gentic building G-4		
TYPE OF BUILDING: <input checked="" 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 checked="" 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"/> LADDER IN	<input type="checkbox"/> LADDER OUT	<input type="checkbox"/> LEAKS	<input type="checkbox"/> DRAIN LINE	<input type="checkbox"/> VALVES	<input type="checkbox"/> FLOAT VALVE
<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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		03-06-20		03-12-20	
CHEMICALS & EQUIPMENTS USED					
1. carola bio plus Quantity 200 ml					
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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
Water Tank cleaning and Disinfection					
Crystalline representative: malash			Signature:		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18116

CUSTOMER: <u>Etisalat F/m</u>			CONTACT PERSON: <u>moorthi</u>		
SITE DETAILS: <u>2nd military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>main F.R.P w tank</u>			LOCATION DETAILS: <u>main mosque Rooftop</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GRP PANEL	<input checked="" 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 checked="" 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"/> LADDER IN	<input type="checkbox"/> LADDER OUT	<input type="checkbox"/> LEAKS	<input type="checkbox"/> DRAIN LINE	<input type="checkbox"/> VALVES	<input type="checkbox"/> FLOAT VALVE
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>02-06-20</u>		<u>02-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>100 ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water tank cleaning and disinfection</u>					
Crystalline representative: <u>makesh</u>			Signature: _____		
Customer/Customer representative: _____			Signature: _____		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

17049

CUSTOMER: <u>Etisalat F/m</u>			CONTACT PERSON: <u>moorhi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 896 7404</u>		
TANK DETAILS: <u>SENTEH wu tank - I</u>			LOCATION DETAILS: <u>psychiatric building v.6</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input 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 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 checked="" 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	
DRAIN LINE		VALVES		FLOAT VALVE	
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>02-06-20</u>		<u>02-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>200ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>Water Tanks cleaning and Disinfection</u>					
Crystalline representative: <u>malesh</u>				Signature: _____	
Customer/Customer representative: _____				Signature: _____	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18117

CUSTOMER: <u>Kizilgat F/M</u>			CONTACT PERSON: <u>marathi</u>		
SITE DETAILS: <u>2nd military Hospital</u>			CONTACT NO: <u>054 9967404</u>		
TANK DETAILS: <u>SENTER WWTank-2</u>			LOCATION DETAILS: <u>psychiatric building U.G.</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input 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 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 checked="" 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"/> NA	
<input type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED				
LADDER IN	LADDER OUT	LEAKS	DRAIN LINE	VALVES	FLOAT VALVE
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>02-06-20</u>		<u>02-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carela bio plus</u> Quantity <u>100ml</u>					
2. _____ Quantity _____					
<input checked="" type="checkbox"/> Submersibel Pump <input checked="" type="checkbox"/> High/Low Pressure Jet <input 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					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaning and disinfection</u>					
Crystalline representative: <u>maksh</u>			Signature: _____		
Customer/Customer representative: _____			Signature: _____		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18120

CUSTOMER: Etisalat F/m			CONTACT PERSON: moorthi		
SITE DETAILS: 2nd military Hospital			CONTACT NO: 054 9967404		
TANK DETAILS: G.R.P Water Tank-1			LOCATION DETAILS: C.S.D Room Ground 4 th		
TYPE OF BUILDING: <input checked="" 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 checked="" type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED
<input type="checkbox"/> NA					<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 checked="" type="checkbox"/> NO
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		04-06-20		04-12-20	
CHEMICALS & EQUIPMENTS USED					
1. carel bio plus (100 ml) Quantity 100 ml					
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 type="checkbox"/> Foot Bath <input 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					
COMMENTS AND RECOMMENDATION:					
water tank cleaning & Disinfection					
Crystalline representative: mohash			Signature: mohash		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18121

CUSTOMER: <u>Alsalat - F/m</u>			CONTACT PERSON: <u>moorthi</u>		
SITE DETAILS: <u>Laded military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>G.R.P water tank - 2</u>			LOCATION DETAILS: <u>C.S.S.D Room Ground Floor</u>		
TYPE OF BUILDING: <input checked="" 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"/> LADDER IN		<input type="checkbox"/> LADDER OUT		<input type="checkbox"/> DAMAGED	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>04-06-20</u>		<u>04-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carel bio plus</u> Quantity <u>100ml</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 type="checkbox"/> Foot Bath <input 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 type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaning Disinfection</u>					
Crystalline representative: <u>Mahesh</u>				Signature: <u>moorthi</u>	
Customer/Customer representative:				Signature:	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18122

CUSTOMER: <u>Etisalat - F/m</u>			CONTACT PERSON: <u>moothi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>SENTEH water tank-1</u>			LOCATION DETAILS: <u>Al Bateen clinic GP</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input 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 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 checked="" 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"/> LADDER IN	<input type="checkbox"/> LADDER OUT	<input type="checkbox"/> LEAKS	DRAIN LINE		VALVES
<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 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
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>04-06-20</u>		<u>04-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carel bio plus</u> Quantity <u>200 ml</u>					
2. _____ Quantity _____					
<input checked="" type="checkbox"/> Submersibel Pump <input type="checkbox"/> High/Low Pressure Jet <input checked="" type="checkbox"/> Extension Cords <input checked="" type="checkbox"/> LED lights <input 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					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaning & Disinfection</u>					
Crystalline representative: <u>mahesh</u>			Signature: <u>maly</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

18123

CUSTOMER: <u>Etisalat - F/m</u>			CONTACT PERSON: <u>marathi</u>		
SITE DETAILS: <u>Zayed military Hospital</u>			CONTACT NO: <u>054 996 7404</u>		
TANK DETAILS: <u>SENTEH water tank-2</u>			LOCATION DETAILS: <u>Al Bateen clinic G.F</u>		
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input 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 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 checked="" 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 checked="" type="checkbox"/> NO	
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
		<u>04-06-20</u>		<u>04-12-20</u>	
CHEMICALS & EQUIPMENTS USED					
1. <u>carel bio plus</u> Quantity <u>200 ml</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 Meter <input checked="" type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION:					
<u>water tank cleaning Disinfection</u>					
Crystalline representative: <u>mahesh</u>			Signature: <u>mahesh</u>		
Customer/Customer representative:			Signature:		



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

CUSTOMER: <u>ETISALAT FM</u>			CONTACT PERSON: <u>MR. MURTHY</u>		
SITE DETAILS: <u>ZAYED MILITARY HOSPITAL - ABU DHABI</u>			CONTACT NO: <u>054-9967404</u>		
TANK DETAILS: <u>IRRIGATION TANK</u>			LOCATION DETAILS: <u>GROUND FLOOR</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL		<input type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> OTHERS	
TYPE OF TANK					
<input checked="" 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			
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 checked="" 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
ACCESS		MANHOLE		<input type="checkbox"/> DAMAGED	
<input checked="" 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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DRAIN LINE		VALVES		FLOAT VALVE	
<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	
TANK CLEANED		TANK DISINFECTED		PIPES DISINFECTED	
<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 type="checkbox"/> NA	
LAST CLEANING DATE		CURRENT CLEANING DATE		NEXT CLEANING DATE	
CHEMICALS & EQUIPMENTS USED					
1. <u>CARILLO BIO</u> Quantity <u>200ML</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 type="checkbox"/> Ladder <input checked="" type="checkbox"/> Ventilating Fan <input checked="" type="checkbox"/> Suction/Discharge Hoses <input checked="" type="checkbox"/> Oxygen Meter <input type="checkbox"/> Vacuum Cleaner <input checked="" type="checkbox"/> Cleaning Materials					
COMMENTS AND RECOMMENDATION: <u>WATER TANK CLEANING & DISINFECTION COMPLETED</u>					
Crystalline representative: <u>YATHAGESHA</u>				Signature: <u>Yathung</u>	
Customer/Customer representative: <u>K.M. MURTHY</u>				Signature: <u>[Signature]</u>	



CRYSTALLINE ENVIRONMENTAL SERVICES

WATER TANK - AFTER SERVICE REPORT

CUSTOMER: <u>ETISALAT FM</u>			CONTACT PERSON: <u>MR. MOORTHY</u>		
SITE DETAILS: <u>ZAYED MILITARY HOSEA TAL - NEAR ANDAZ</u>			CONTACT NO: <u>054-9967404</u>		
TANK DETAILS: <u>IRRIGATION TANK</u>			LOCATION DETAILS: <u>GROUND FLOOR</u>		
TYPE OF BUILDING: <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHERS					
<u>TYPE OF TANK</u>					
<input checked="" 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		
<u>SIZE OF TANK</u>			<u>QUANTITY OF WATER</u>		
M3	USG	L*B*H	<input type="checkbox"/> FULL	<input checked="" type="checkbox"/> HALF	<input type="checkbox"/> EMPTY
<u>CONDITION OF WATER TANK BEFORE CLEANING</u>			<u>CONDITION OF WATER TANK AFTER CLEANING</u>		
<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 checked="" 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
<u>ACCESS</u>		<u>MANHOLE</u>	<input checked="" type="checkbox"/> COVERED	<input type="checkbox"/> DAMAGED	<input type="checkbox"/> NA
<u>LADDER IN</u>	<u>LADDER OUT</u>	<u>LEAKS</u>	<u>DRAIN LINE</u>	<u>VALVES</u>	<u>FLOAT VALVE</u>
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input 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
<u>TANK CLEANED</u>		<u>TANK DISINFECTED</u>		<u>PIPES DISINFECTED</u>	
<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 type="checkbox"/> NA
<u>LAST CLEANING DATE</u>		<u>CURRENT CLEANING DATE</u>		<u>NEXT CLEANING DATE</u>	
<u>CHEMICALS & EQUIPMENTS USED</u>					
1. <u>CARICO BIO</u> Quantity <u>800 ml</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 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					
<u>COMMENTS AND RECOMMENDATION:</u> <u>WATER TANK CLEANING & DISINFECTION COMPLETED</u>					
Crystalline representative: <u>YATHISHA</u>			Signature: <u>Yathisha</u>		
Customer/Customer representative: <u>K. N. MOORTHY</u>			Signature: <u>K. N. Moorthy</u>		



CRYSTALLINE ENVIROMENTAL SERVICES

KITCHEN EXHAUST SYSTEM - AFTER SERVICE REPORT

1525

CUSTOMER: <u>ENGINEERING OFFICES</u>	CONTACT PERSON: <u>MR - SAJI</u>
SITE DETAILS: <u>SHEK MOHAMED MAIN</u>	CONTACT NUMBER: <u>052-6928525</u>
NAME OF KITCHEN: <u>2036 VILLA</u>	LOCATION: <u>F.M 2036</u>
TYPE OF BUILDING: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> HOTEL <input checked="" type="checkbox"/> RESIDENCIAL <input type="checkbox"/> RESTAURANT	

Type & Size of Hood:

Cooking Volume:	<input type="checkbox"/> Very High	<input type="checkbox"/> High	<input checked="" type="checkbox"/> Medium	<input type="checkbox"/> Low
Type of Filters:	<input type="checkbox"/> Mesh	<input checked="" type="checkbox"/> Baffle	<input type="checkbox"/> N/A	
Filters in Place:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A	
Filter Cleaning Freq.	<input type="checkbox"/> Daily	<input checked="" type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Not Known

Comments:

FIRE PROTECTION SYSTEM

Kitchen:	<input type="checkbox"/> Powder	<input checked="" type="checkbox"/> CO2	<input type="checkbox"/> Foam	<input type="checkbox"/> Other
Cooker Hoods:	<input checked="" type="checkbox"/> CO2	<input type="checkbox"/> Sprinkler	<input type="checkbox"/> Dry Powder	<input type="checkbox"/> Other
Fire Dampers:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Fusible Links:	<input type="checkbox"/> Yes <input type="checkbox"/> No

DUCTWORK

Duct Made of:	<input checked="" type="checkbox"/> Galvanized Steel	<input type="checkbox"/> Stainless Steel	<input type="checkbox"/> Other
Physical Entry:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Partly
Access with Tools only:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partly
Vertical Access:	<input type="checkbox"/> Rope access	<input checked="" type="checkbox"/> Safety Harness	<input type="checkbox"/> N/A
Entire System Cleaned	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No if No, give details	

Comments

Doors/Plates Present:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> No. of doors	<input type="checkbox"/> No of Panels
Doors/Plates Installed:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> No. of doors	<input type="checkbox"/> No of Panels

Where Installed:

Duct Size & Approx. Length: <u>5 MT</u>	Insulated:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Condition of Ducts:	<input checked="" type="checkbox"/> Clean	<input type="checkbox"/> Dirty	<input type="checkbox"/> Very Dirty
Damaged:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Where <input type="checkbox"/> N/A
Exhaust Fans:	<input checked="" type="checkbox"/> Upblast	<input type="checkbox"/> Inline	<input type="checkbox"/> Utility <input type="checkbox"/> Others

Location: 'ROOF TOP Condition of Roof: GOOD

LAST CLEANING DATE	CURRENT CLEANING DATE	NEXT CLEANING DATE
	<u>26-09-2020</u>	<u>26-03-2021</u>

CHEMICALS AND EQUIPMENTS USED

<input type="checkbox"/> JETTING MACHINE	<input type="checkbox"/> INLET WATER HOSE	<input checked="" type="checkbox"/> EXTENTION CORDS	<input type="checkbox"/> VACCUM CLEANER
<input checked="" type="checkbox"/> LED LIGHTS	<input checked="" type="checkbox"/> PLASTICS ROLL/BAGS	<input checked="" type="checkbox"/> SUITABLE PPE	<input checked="" type="checkbox"/> DEGREASER CHEMICAL
<input checked="" type="checkbox"/> LADDER			

COMMENTS AND RECOMMENDATION: 2 MT SINGLE HOOD CLEANING
20 MT DUCT & 2 NOS EXHAUST FAN CLEANED

Crystalline Representative: <u>LIANSAZI</u>	Signature: <u>[Signature]</u>
Customer Representative: <u>MURAF 20698</u>	Signature: <u>[Signature]</u>

CRYSTALLINE CLEANING & ENVIRONMENTAL SERVICES

WATER TANK CLEANING & DISINFECTION

CLIENT NAME : ETISALAT FACILITIES MANAGEMENT
CONTACT PERSON : MR.PERCIVAL GALLARDO LIBUNAO
DESIGNATION : HVAC & MECHANICAL ENGINEER
SITE DETAILS : ZAYED MILITARY HOSPITAL - ABU DHABI
DETAILS : WATER TANK CLEANING & DISINFECTION
DATE OF CLEANING : JUNE 2020
FREQUENCY OF CLEANING : HALF YEARLY
DATE OF NEXT CLEANING : 01 DECEMBER 2020

The above water tanks were cleaned and disinfected in accordance with the Code of Practice for the inspection and cleaning of customer water storage tanks.



Tasman Pinto

CRYSTALLINE CLEANING AND ENVIRONMENTAL SERVICES