



| REQUESTS / COMPLAINT FORM | | Water Point Number | |
|--|---------------------|--|-------------------------|
| Request Number | | Date of Request | |
| Location Name | | GPS Reading | S: E: |
| 1. General Details | | | |
| Request Received From: <input type="checkbox"/> Community <input type="checkbox"/> Maintenance <input type="checkbox"/> Extension <input type="checkbox"/> Inspection <input type="checkbox"/> Regional Head <input type="checkbox"/> Other | | If Community or other, Name, Position & Address: | |
| Request Received For: <input type="checkbox"/> Extension <input type="checkbox"/> Tanker Delivery | | Repair: <input type="checkbox"/> Maintenance - Mechanical <input type="checkbox"/> Collect Materials (Section 2) <input type="checkbox"/> Maintenance - Civil <input type="checkbox"/> WR Equipment Repair (Section 3) <input type="checkbox"/> Maintenance - Pipeline <input type="checkbox"/> Other Equipment Repair (Section 3) <input type="checkbox"/> Maintenance - Electrical | |
| Detail of Problem Reported | | | |
| Reported By: Date | | Name | Signed |
| 2. Material List | | | |
| Part Number | All Material Issued | Quantity | |
| | | Returned | Collected |
| | | | |
| | | | |
| | | | |
| Received By: Date | | Name | Signed |
| 3. WR Equipment Brought in for Repair | | | |
| Type of Equipment | WR Number | Serial Number | Brought in or Collected |
| | | | |
| | | | |
| | | | |
| Delivered By: Date | | Name | Signed |
| Completed: Date | | Name | Signed |
| This is a long term problem which will be resolved with the Rehabilitation Programme | | | YES / NO |
| Checked: Date | | Name | Signed |
| Entered: Date | | Name | Signed |