

MAJLIS BANDARAYA KUCHING SELATAN

Council of the City of Kuching Selatan

Jalan Padungan, 93675 Kuching Telephone No.: 082-354200 Ext: 6235 Fax No.: 082-244030

Ref. No.: MBKS/PH/LWU (Des) No

| REQUEST FOR DESLUDGING | OF SEPTIC TANK |
|--|---|
| N | Name of Applicant (in full): |
| | (In block letters) |
| | Address: |
| | |
| | |
| | Tel. No. / H/P No.: |
| Administrative Officer Public Health Division Kuching City South Council | Date: |
| Sir/Mdm | |
| I wish to desludge a septic tank at | |
| which does not coincide with Council's desludging schedule due to (tick $\sqrt{\mbox{ any of }}$ | the reasons below):- |
| Septic tank full and overflow. | |
| Other reasons (state) | |
| NOTE: City Council will not be held responsible for any damage caused wh made to ensure that no undue inconvenience of damage is done. | ile desludging work is carried out, but every effort will be Signature: |
| | I.C.No.: |
| FOR OFFICIAL USE | : ONLY |
| 1. то | |
| Please check the following: - | |
| a) Type of property: Record of previous deslu | udging date: |
| b) Charges for the additional desludging service (where applicable): RM | |
| 2. то | |
| Please arrange to inspect / desludge and report. | |
| | |
| | |
| | |
| | Date: |
| 3. Desludged date: | Truck No.: |
| 4. Reference No: 5. Updated by: | Date: Receipt No: |
| Or Opaulog 53 | (Applicable to additional service only) |