



**MAJLIS BANDARAYA KUCHING SELATAN**

**Council of the City of Kuching South**

Jalan Padungan, 93675 Kuching

Telephone No.: 082-354 200 Ext. 565

Fax No.: 082-244 030

Ref. No.: MBKS/PH/WMU(Des) No. \_\_\_\_\_

**REQUEST FOR DESLUDGING OF SEPTIC TANK**

Name of Applicant (*in full*): \_\_\_\_\_  
[in block letters]

Address: \_\_\_\_\_

Tel. No. / H/P No.: \_\_\_\_\_

Date: \_\_\_\_\_

Administrative Officer  
Public Health Division  
Kuching City South Council

Sir/Mdm

I wish to desludge a septic tank at \_\_\_\_\_  
which does not coincide with Council's desludging schedule due to (tick ✓ any of the reasons below): -

Septic tank full and overflow.

Other reasons (*state*) \_\_\_\_\_

For the additional service, I agree to settle the necessary payment in advance before work is carried out, failing which this application shall be treated as cancelled.

**NOTE: City Council will not be held responsible for any damage caused while desludging work is carried out, but every effort will be made to ensure that no undue inconvenience of damage is done.**

Signature : \_\_\_\_\_

I.C.No. : \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

1. To \_\_\_\_\_

Please check the following: -

a) Type of property: \_\_\_\_\_ Record of previous desludging date: \_\_\_\_\_

b) Charges for the additional desludging service (where applicable): RM \_\_\_\_\_

2. To \_\_\_\_\_

Please arrange to inspect / desludge and report.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date : \_\_\_\_\_

3. Desludged date : \_\_\_\_\_

Truck No. : \_\_\_\_\_

4. Reference No. : \_\_\_\_\_

Date : \_\_\_\_\_

5. Updated by : \_\_\_\_\_

Receipt No. : \_\_\_\_\_

(Applicable to additional service only)