



D24.3 Template of the Annual O&M Report for Hatsady Tai, Laos

ESS-O&M annual report, 20__

Annual ESS-O&M Report Ban Hatsaty Tai, Vientiane, Lao PDR

This report and attached inspection checklists document the inspection and maintenance conducted for the environmental sanitation services (ESS) in Hatsady Tai during the annual reporting period indicated below.

1. Contact Information

Name of the author of this report: _____

Function of the author of this report (within VEU): _____

Phone number of contact person: _____ Email: _____

Address: _____

2. Reporting Period

This report, with the attached completed inspection checklists, documents the inspections and maintenance of the environmental sanitation services during the time period from _____ (dd/mm/yy) to _____ (dd/mm/yy).

3. Stormwater drainage network

Sediment Removal

Total amount of accumulated sediment removed from the stormwater drainage network during the reporting period: _____ cubic meters.

The sediment was removed and disposed as follows: _____

Main maintenance activities related to O&M of drainage network

The following activities were conducted in the reporting period to maintain or improve the functionality and structural sustainability of the stormwater drainage network:

Activity (define if routine/periodic/urgent maintenance)	Period (Date)

Statement of Stormwater Drainage Network Condition

Based on the inspections documented in the attached checklists, is the drainage network defined in this report functional and being maintained as defined in the Drainage O&M procedure? (Check yes or no)

YES NO

If "NO", describe problem, proposed solution and schedule of correction:

4. Sewer and community septic tanks

Sludge Removal

Total amount of accumulated sludge removed from the sewer system (including control chambers) and the community septic tanks during the reporting period: _____ cubic meters.

The sludge was removed and disposed as follows: _____

Was the community septic tank *ST-A* desludged during the reporting period? (Check yes or no)

___ YES: _____ (Date) _____ (emptier)

___ NO → When was it emptied for the last time? _____ (date)

→ When will it be desludged the next time? _____ (date)

Was the community septic tank *ST-B* desludged during the reporting period? (Check yes or no)

___ YES: _____ (Date) _____ (emptier)

___ NO → When was it emptied for the last time? _____ (date)

→ When will it be desludged the next time? _____ (date)

Main maintenance activities related to O&M of sewers and community septic tanks

The following activities were conducted in the reporting period to maintain or improve the functionality and structural sustainability of the sewers and community septic tanks:

Activity (define if routine/periodic/urgent maintenance)	Period (Date)

Statement of Sewer Systems and Community Septic Tanks Condition

Based on the inspections documented in the attached checklists, are the sewer systems and community septic tanks defined in this report functional and being maintained as defined in the Sewer System and Community Septic Tanks O&M procedure? (Check yes or no)

___ YES ___ NO

If "NO", describe problem, proposed solution and schedule of correction:

5. Household sanitation infrastructure (Cesspits, septic tanks)

Were private cesspits and septic tanks desludged during the reporting period? (Check yes or no)

___ NO

___ YES: → How many? _____ cesspits and _____ septic tanks

→ List households that have desludged their cesspit or septic tank in the reporting period:

Main inspection and maintenance activities related to O&M of household sanitation infrastructure

The following activities were conducted in the reporting period to maintain or improve the functionality and structural sustainability of the household sanitation infrastructure:

Activity (define if routine/periodic/urgent maintenance)	Period (Date)

Statement of Household Sanitation Infrastructure Condition

Based on the inspections documented in the attached checklists, is the household sanitation infrastructure defined in this report functional and being maintained as defined in the Household Sanitation Infrastructure O&M Procedure? (Check yes or no)

YES NO

If "NO", describe problem, proposed solution and schedule of correction:

6. Solid waste management infrastructure

Main inspection and maintenance activities, costs related to O&M of household sanitation infrastructure

The following activities were conducted in the reporting period to maintain or improve the functionality and structural sustainability of the solid waste management system:

Activity (define if routine/periodic/urgent maintenance)	Period (Date)

Statement of Solid Waste Management Condition

Based on the inspections documented in the attached checklists, is the solid waste management system defined in this report functional and being maintained as defined in the solid waste management O&M procedure? (Check yes or no)

YES NO

If "NO", describe problem, proposed solution and schedule of correction:

7. O&M equipment, storehouse

Has an inventory of the O&M equipment been established and updated? (Check yes or no)

___ YES: _____(date) ___ NO

Is there a need to replace O&M equipment? (Check yes or no)

___ YES ___ NO

If "YES", describe which equipment needs to be replaced, including cost estimate:

8. Financial management of ESS

Total costs of O&M activities

Expenses related to the operation, maintenance and inspection of the environmental sanitation infrastructure in the reporting period amounted to _____ KIP.

ITEM	KIP
O&M stormwater drainage	
O&M sewer system	
O&M community septic tanks	
O&M solid waste management	
O&M household infrastructure	
Equipment (replacement)	
Allowances	
Others	
Total	

Statement of environmental sanitation service fund (ESSF)

As of _____(date), money available in the ESSF amounted to _____ KIP.

ITEM	KIP
Income in the reporting period:	
Through monthly ESS fee	
Through other income sources	
Expenses in the reporting period:	
Balance:	

Environmental sanitation service fee

Should the level of the environmental sanitation service fee be reviewed? (Check yes or no)

___ YES ___ NO

9. Personnel

The following members of the VEU were involved in the inspection, operation and maintenance of ESS in Hastady Tai:

Name	Gender	Responsibilities

10. Final remarks, general recommendations

11. Certification

I hereby certify that the information presented in this report and attachments is true and complete:

Signature _____

Date _____

Type or Print Name

<p>Official Approval</p> <p>This report is approved and endorsed by the Head of the village (Naiban), represented herewith by:</p> <p>Naiban of Hatsady Tai:</p> <p>Name: _____ Signature _____</p> <p>Function: _____ Date: _____</p>	
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Annexes: Inspection reports

(Number of reports)

Inspection reports stormwater drainage system: _____

Inspection reports sewer and community septic tank: _____

Inspection reports household sanitation infrastructure: _____

Inspection reports solid waste management system: _____