

Week 12

## QUALITY Weekly Report

| Contract # |  |
|------------|--|
| Customer   |  |

|   | •                |                     |              |         |                        |  | - |  |  |  |       |         |  |        |       |    |
|---|------------------|---------------------|--------------|---------|------------------------|--|---|--|--|--|-------|---------|--|--------|-------|----|
| Make  |                  | Model               |              | Seria   | Serial # Equipme       |  |   |  |  |  |       | £       |  |        |       |    |
| Inspection: C                                     | heck if acceptat | ole in accordance v | vith Complia | ance Se | vices                  |  |   |  |  |  |       |         |  |        |       |    |
| Week #:   |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| All functions operate properly                    |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Structure and components secure and undamaged     |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Safety devices intact and functional              |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Operational and safety decals present and legible |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Batteries Charged                                 |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Electrical cord/plug                              |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Containment tank Qty Pumps:                       |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Appearance acceptable                             |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Fire Extinguisher Qty:                            |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| First Aid   |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
|   | Manuf            | acture/Model        |              |         |                        |  | • |  |  |  |       |         |  |        | •     |    |
| AED   |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| S/N Pad Exp.                                      |                  |                     |              |         | Battery Exp. Placed in |  |   |  |  |  | า Ser | Service |  |        |       |    |
|   |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Weekly N  | otes:            |                     |              |         |                        |  |   |  |  |  |       |         |  | Г      | Initi | al |
| Week 1  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Week 2  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Week 3  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Week 4  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  | $\top$ |       |    |
| Week 5  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  | $\top$ |       |    |
| Week 6  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Week 7  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Week 8  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Week 9  |                  |                     |              |         |                        |  |   |  |  |  |       |         |  |        |       |    |
| Week 10   |                  |                     |              |         |                        |  |   |  |  |  |       |         |  | $\top$ |       |    |
| Week 11   |                  |                     |              |         |                        |  |   |  |  |  |       |         |  | $\top$ |       |    |