

Annexure-VIII: Reporting Format

Date:

Beneficiary Type:

Beneficiary Name:

Contact No:

Address:

General Parameters

| Sl. No | Parameters | Status | Remarks |
|--------|---------------------------------------|--------|---------|
| 1 | Functionality of the system | | |
| 2 | Condition of collectors | | |
| 3 | Hot water pipe insulation | | |
| 4 | Cold water pipe insulation | | |
| 5 | Glycol level check | | |
| 6 | Water Leakage from the pipes | | |
| 7 | Monthly Average Hot water temperature | | |
| 8 | Support structures for water tanks | | |
| 9 | Support structures for collectors | | |
| 10 | Fencing and surrounding | | |
| 11 | Electricity bill for the month | | |
| 12 | Any other observations | | |

Signed by the Operator/ Technician

Verified by the Head of the Institution