



Annual Operation and Maintenance Report

PVPS project

1. Project Information

Project name	
District	
Local government (VDC/Municipality)	
Ward N°	
Village name	
Contact person (Name)	
Contact person (Phone number)	

Installation company	
Date of PVPS commissioning	
Date of the last annual O&M Report	
Assessed Period (from...to....)	
Operational year (N°)	

O&M Report prepared by (Name/entity/function)	
Date	
Data collection	<input type="checkbox"/> Site visit <input type="checkbox"/> Phone communication <input type="checkbox"/> Other <i>Details:</i>



2. Performance Indicators

Parameter	Value
Current flow meter reading (measured at the inlet of the distribution tank)	Date: Volume [m ³]:
Previous flow meter reading	Date: Volume [m ³]:
Water volume pumped during the assessed period [m ³]	
Duration of the assessed period [days]	
Water volume pumped in average during the assessed period [m ³ /day]	
Design requirement [m ³ /day]	
Are performances in [m ³ /day] above design requirement? <i>If no, please explain potential reasons:</i>	<input type="checkbox"/> yes <input type="checkbox"/> no
Are there any on-going claim(s) against the installation company and/or component manufacturer? <i>If yes, please detail:</i>	<input type="checkbox"/> yes <input type="checkbox"/> no

3. Technical Issues (if any)

Date	Technical issue	Issue Resolved	Mitigation measure
		<input type="checkbox"/> yes <input type="checkbox"/> no	
		<input type="checkbox"/> yes <input type="checkbox"/> no	
		<input type="checkbox"/> yes <input type="checkbox"/> no	



4. Maintenance Activities

List of the maintenance activities carried out on the system during the assessed period

Date	Maintenance activity

5. Questionnaire

Item	Question	Answer
1	Was the Installation Company responsive under the after-sale service contract and during the warranty period? <i>If no, please detail:</i>	<input type="checkbox"/> yes <input type="checkbox"/> no
2	What are the monthly fees collected by the User Committee?NRs
3	Are there been any incidents (disease, etc.) reported due to water quality?	<input type="checkbox"/> yes <input type="checkbox"/> no
4	Are there been any water shortage during the assessed period? Especially at dry season? <i>If yes, please detail:</i>	<input type="checkbox"/> yes <input type="checkbox"/> no
5	Was the community overall satisfied by the PVPS system during the assessed period? <i>If no, please detail:</i>	<input type="checkbox"/> yes <input type="checkbox"/> no

6. Annexes

Please attach site pictures (if available) and any supportive documents related to O&M activities of the PVPS project during the assessed period.