ATALIAN
GLOBAL SERVICES
SWIPETASK

EPS MOE Form F4 Report

School: Angsana Primary School	**Month:** February	
Vector Control Technicians/ Workers Names:	**Work Performed**	
Azlam Shah Alias,Avinan Avinan,Team member A1,Team member A2,Team member B1,Team member B2,Team member C1,Team member C2,Team member D1,Team member D2,	**Type of Services**	**No of Services Performed**
	Common Pest	126
	Mosquitoes	126
	Subterranean Termites	126
	All Pest	126

Week	Date of Visit	Checkpoint 1	Checkpoint 2	Checkpoint 3	Checkpoint 4	Checkpoint 5	Checkpoint 6	Checkpoint 7	Checkpoint 8	Checkpoint 9	Checkpoint 10	Checkpoint 11	Checkpoint 12	Checkpoint 13	Checkpoint 14	Checkpoint 15
1st																
1st	**2023-02-02**	10:09	10:12	10:14	10:55	10:17	10:18	10:21	10:27	10:30	10:32	10:40	10:40	10:54	10:44	10:54
2nd	**2023-02-06**	13:28	13:32	13:32	13:28	13:27	13:29	13:31	13:32	13:33	13:31	13:31	13:29	13:33	13:32	13:28
2nd	**2023-02-09**	10:00	10:01	10:02	10:03	10:04	10:05	10:06	10:07	10:08	10:09	10:10	10:11	10:12	10:13	10:14
3rd	**2023-02-13**	09:00	09:01	09:02	10:00	09:03	09:04	09:00	09:05	09:06	09:07	09:07	09:08	09:11	09:09	09:10
3rd	**2023-02-16**	10:15	10:17	10:18	10:19	10:20	10:21	10:22	10:23	10:24	10:25	10:26	10:27	10:28	10:29	10:30
4th	**2023-02-20**	09:34	09:37	09:34	09:32	09:33	09:41	09:37	09:39	09:35	09:33	09:36	09:40	09:34	09:38	09:32
4th	**2023-02-23**	10:15	10:07	10:11	10:10	10:17	10:08	10:05	10:14	10:13	10:16	10:08	10:12	10:14	10:09	10:14
5th	**2023-02-27**	13:28	13:32	13:35	13:38	13:41	13:44	13:47	13:50	13:53	13:56	13:59	14:02	14:05	14:08	14:11
5th																

Acknowledged by Managing Agent