 **CUSTOMER SERVICE REPORT**

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| Company | Albany Memorial Hospital | | Start Date: 12/23/20 | | | Time: 7:00 AM |
| Address | 600 Northern Blvd. | | Completion Date: 12/23/20 | | | Time: 4:45 PM |
| City | Albany | State: NY | | Zip: 12208 | Country: USA | |
| Attention | Kevin Machkenzie | Nalco Technician: Dennis Searle | | | | |
| Nalco Copies to | Mike Pidlypchak, Adam Patria, Thomas Poole, Steve E. Moran, Dakota Snyder | Nalco Service Supervisor: Mike Pidlypchak | | | | |

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| ***Project Summary/Recommendations*** |
| This service was focused on re-starting the existing Main Envirox Generator and establish consistent Chlorine Dioxide levels throughout the hospital. With the help of the on-site personal, all goals and objectives have been completed. I have provided a completed summary of work performed, results findings, recommendations and improvements moving forward.  **Envirox Generator Re-start**   * Initial testing of the Chlorine Dioxide dosage tank found depleted residuals of CLO2 ppm levels. Therefore the dosage tank was pumped out and cleaned. * The Envirox Generator was layed-up and required additional work to get all electrical, tubing, pumps and injection areas installed. * After starting the Envirox unit the main peristaltic pump needed replacement and I had a back up pump on my truck that was installed and worked properly. * During the production of CLO2 I worked on the feed pump system and found missing parts and seals. I was able to find extra parts and seals and confirmed feed pump was operational. * All Filters were installed and water flow was confirmed through the system. * The “Chlorine Dioxide” monitor unit was dismantled. I found some old parts, cleaned, installed sensor and calibrated unit. * After the confirming all connections we started feeding CLO2 into the hospital cold water supply. Reading were obtained from the following locations. We confirmed levels were within EPA recommended guidelines.   Locations Tested and Results Below:   1. Cold Water Sample Point – 0.41 ppm 2. 419 South – 0.11 ppm 3. 409 South 0.23 ppm 4. 4 Nutrition Center – 0.40 ppm 5. 4 West Room #43801 – 0.13 ppm 6. 440.12 West Wing 0.09 ppm 7. Hot Zone Testing 0.21 ppm   **Follow up Testing** was competed today by Thomas Poole, Albany Hospital Technician. Levels throughout the hospital averaged 0.40 ppm and all settings and feed rates are being maintained. Thomas Poole will perform follow up testing going forward and report any irregularities to me directly. I’m planning to return for follow up testing the first week in January 2021.  **Inventory Supplies Needed:**   1. (4) Carbon Filters 2. (1) peristaltic pump needed to replace my truck inventory 3. (2) Chlorine Dioxide Sensors for the Grundfos CLO2 monitor unit. 4. ORP Probe for Nalco Legacy Controller 5. Sim Card Gateway   **Future Recommendations:**   * Hot Water Loop – Consider discontinuing the (Copper Silver Unit) activate the other Envirox generator and treat the Hot Water Loop with CLO2 disinfectant. * Upgrade to the New Nextgen Controller with the Nalco Oxidant Controller to monitor the Chlorine Dioxide levels 24/7/365. * Upgrade Albany Memorial Tester to the EPA approved “Palintest” equipment for inhouse monitoring.   If you have further questions or comments, please feel free to contact me directly.  Dennis Searle, SV102 Field Services. Mobile: (617) 775-7247 Email: [dlsearle@ecolab.com](mailto:dlsearle@ecolab.com)  ***Type of Service:***  Sand Filter 3D Trasar/Trasar 3000 Account Start Up Installation  Soft and Clear Water Softener Boiler X Envirox Service  ***Safety Measures****:*  Area isolated with caution tape/barrier X Proper Personal Protective Equipment utilized  Lockout/Tagout completed Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***Check-Out Procedures***  X System operation is restored Lockout/Tagout removed Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Caution tape/barriers removed Area is cleaned - Trash is removed X Project Completion discussed with Customer |
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#### I have reviewed this report with a Nalco Services Representative

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| CUSTOMER  SIGNATURE | PRINT NAME: | DATE 12/23/20 |

*To be Completed by NS Representative*

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| SIGN | PRINT NAME: Carl Beechler  TITLE: Field Service | DISTRICT: |

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