

DEWATS Monitoring tool



NGO:
DEWAT ID:
Month & Year:

Camp / Block:
Population covered:
Latrines covered:

Inlet						Remarks				
#	Date	Block/Sub-block	Volume disposed (m3)	Inlet Start time	Inlet End time	chlorination 15 mg/l (yes / No) - only if outbreak or no infiltration	Person in charge / DEWAT supervisor		Other (sample taken, infiltration issues, incidents, etc)	
							Name	Signature		
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
Total volume:							Quality information of the last sample taken:			
Average m3/day inlet:										