



## Daily Construction Report

Project Number:  
 Project Name:  
 Project Address:  
 City / State / ZIP:  
 Project Contact:  
 Notes:

Report Date:  
 Completed By:  
 Completed By Email:  
 Customer Name:  
 Customer Address:  
 City / State / ZIP:  
 Customer Contact:

Conditions		
#	Item/Questions	Comments
1.	Weather and temperature	
2.	Ground conditions	

General Information		
#	Item/Questions	Comments
1.	Date of work	
2.	Task Code/Area of work	
3.	Description of work	
4.	Describe any significant delays that occurred (if any)	
5.	List visitors on site today (if any)	

Equipment or Rentals Used				
Select or enter all equipment used on the job today				
Item Number / Item Description	Notes	Unit Type	Length	Qty
7319 N95 Particulate Dust Mask Respirator	Size small, comfort straps	Each		20.0
CWOPS18 5/8"x 4' 0"x 12' 0" Firecode Type X Board		Each	12' 6"	12.0

Manpower
Check Y for all workers on site today. For all items checked, include number of employees in the comment field.



Project Name:

Form #:

Form Date:

#	Item/Question	Yes	No	NA	Comments
1.	Capenters				
2.	Caulkers				
3.	Concrete				
4.	Flooring				
5.	HVAC				
6.	Insulators				
7.	Iron Workers				
8.	Laborers				
9.	Landscapers				
10.	Plasterers				
11.	Plumbers				
12.	Roofers				
13.	Sheet Metal				
14.	Supervision				
15.	Other - If checked Y, enter the trade as well as the number of workers in the comment field.				

Employee List		
List all employees on site today.		
#	Employee Name	Comments
1.	100 / Employee 1	
2.	101 / Employee 2	

Acknowledgement			
Signing this report acknowledges that you have read the daily construction details and have no changes to make to the reported work.			
SIGNATURE NAME	SIGNATURE	SIGNATURE DATE/TIME	SIGNATURE NOTE