

T.A. WOODS COMPANY
Mechanical Electrical Plumbing General Contractor

Subcontractor Daily Report Form

Project: _____ **Project #** _____

Date: _____ Day: (Circle) Mon. Tues. Wed. Thur. Fri. Sat. Sun.

Subcontractor: _____ **Trade:** _____

Competent Person: _____ **Contact:** _____

Site Employees:

| Employee Name | Trade/Classification | Hours |
|---------------|----------------------|-------|
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Work Performed Description and Location: _____

Equipment/Material Received: _____

Safety (Meeting, Deficiencies, Corrective Action): _____

Construction Equipment on Site: _____

Inspections or Tests performed (pass/fail): _____

Rework: _____

Signature: _____

Please make sure that you update T.A. Woods Company's Jobsite drawings and your own with all As-Built information weekly. This is for your benefit.