

PTS DOC #
ELECTRONIC

FORM VERIFIER LINE # 1

INITIALS GG

JOB NUMBER-COMPLETE

START DATE

9/6/24

START DAY

Friday

STOP DATE

9/6/24

END DAY

Friday

CREW SHEET#

LAST 3 LETTERS OF JOB NAME-6 DIGIT DATE-LAST 3 #'S OF VERIFIERS JDE

TEL - 90624 - 994

JOB NAME

Citizen M Chicago Downtown Hotel

JOB ADDRESS

80 E WackerPl
Chicago IL

SAFETY TOPIC

PPE

TOOL BOX TRAINING COMPLETED?

☐

☐

LOSS CAUSE

CODE

LOCATION

WEATHER

☐ FIRE

L00

Job site

☐ HUMID

☐ WATER/FLOOD

L01

☐ TEMP 70

☐ WIND

L02

☐ SNOW

☐ MOLD

L03

☐ RAIN

☐ EARTHQUAKE

L04

☐ WINDY

☐

L05

☐

☐

L06

☐

JOB STATUS

Code

Vehicle Name (Table)

New

☐

RETURN

Ongoing

☐

Date -

Comp

☐

Time -

Hold

☐

(explain why in description)

Other

Contact:

Lockbox / Other Code:

529 PICKUP, SUV OR CAR

530 VAN, PASSENGER/CARGO

518 TRUCK-MOVING/BOX/BOARD UP

523 TRUCK, 3/4 TON PICKUP

527 TRUCK, 1 TON 4X4 W/LIFTGATE

453 TRUCK, EXTRACTION

N/A NO VEHICLE

FOR RENTAL CARS:

FILL IN VEHICLE CODE AND CHECK BOX

| OFFICE | ID# | PERSONNEL NAME | | RATE CLASS | 24 HOUR CLOCK | | | TOTAL HOURS | LOCATION CODE | PHASE CODE | HOURS BY PHASE | SMALL TOOLS | PPE | PRP - FIT TEST | PPF - HARNESS | PER DIEM | SEE GUIDE SHEET | | SHARE ROOM | SEE TABLE | | PERSONNEL NAME | |
|--------|------|----------------|------------------|------------|---------------|-------------------------|-----------------|--------------|---------------|------------|----------------|-------------|-----|----------------|---------------|----------|-----------------|--|---------------------------------|---------------------------------|----------------------------|----------------|--|
| | | START TIME | LUNCH | | STOP TIME | CONFIRM HOURS BY PERSON | HOTEL NAME CODE | HOTEL ROOM # | | | | | | | | | VEHICLE CODE | YOUR SIGNATURE REPRESENTS THE APPROVAL TO PAY YOUR DOCUMENTED HOURS WORKED. A LACK OF SIGNATURE MAY RESULT IN UNTIMELY OR NO PAY | | | | | |
| | | | START TIME | | | STOP TIME | | | | | | | | | | | | | | BY OTHER | | | |
| | | | | | | | | | | | | | | | | | | | | | PRINT FIRST THEN LAST NAME | | |
| 1 | 1011 | 1910994 | Gustavo Galvez | | 700 | 1200 | 1400 | 6.50 | L00 | WTR | 6.50 | N | N | N | N | N | NA | NA | N | 527 | | VERIFIER | |
| | | | | | | 1230 | | | | | | | | | | | | | <input type="checkbox"/> RENTAL | | GG | | |
| 2 | 1011 | 1632176 | Jordan Hankey | | 700 | 1200 | 1400 | 6.50 | L00 | WTR | 6.50 | N | N | N | N | N | NA | NA | N | 530 | | VERIFIER | |
| | | | | | | 1230 | | | | | | | | | | | | | <input type="checkbox"/> RENTAL | | GG | | |
| 3 | 1011 | 707 | Wilson Rodriguez | | 700 | 1200 | 1400 | 6.50 | L00 | WTR | 6.50 | N | N | N | N | N | NA | NA | N | N/A | | VERIFIER | |
| | | | | | | 1230 | | | | | | | | | | | | | <input type="checkbox"/> RENTAL | | GG | | |
| 4 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 5 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 6 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 7 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 8 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 9 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 10 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 11 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 12 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 13 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |
| 14 | | | | | | | | | | | | N | N | N | N | N | | | N | <input type="checkbox"/> RENTAL | | VERIFIER | |

RESPONSIBILITY OF APPROVER: PLEASE COMPLETE ALL REQUESTS BELOW

STEP 1-PRINT APPROVER NAME

Jordan Hankey

STEP 2-DID THE FORM VERIFIER REVIEW THIS FORM FOR COMPLETION?

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☐

IF "N", YOU MUST VERIFY & COMPLETE ALL OUTSTANDING ISSUES INCLUDING TOP SECTION OF FORM

STEP 3-TOTAL HRS

19.5

THESE TWO TOTALS SHOULD MATCH

←

→

STEP 4-PHASE HRS

19.5

STEP 5 - DOES THE PTS COVER:

☐ WHO

☐ WHERE

☐ WHEN

WORK DESC:

☐ WHAT

☐ WHERE

☐ WHY

☐ HOW

STEP 6-APPROVER SIGNATURE

Jordan Hankey

WORK DESCRIPTION: BASED ON LOCATION(S) WORKED AND PHASE CODE(S), PLEASE DESCRIBE WHAT WORK THE CREW PERFORMED

I called for the emergency upon arriving to the warehouse . We are loaded the emergency truck with the necessa ry tools that were needed for the job. Once arriving at the job site we met with the maintenance Cisco . He showed us the units that were affected after showing us the units. We went back to the truck and unloaded the necessa ry tools that we needed to start the job first we started extracting the water on the on the 13th 13th floor then we entered unit 1330 with our moisture reader we checked all the walls and our walls were marking 99 and the flooring was at 20% after we went down to unit 1230 and when our moisture reader, we checked the walls wall one wall two and wall three were marking a 99 and the shower wall one was marking at 45% floors were marking at 19 through 20% set up equipment at 1330 and 1230 then we had to go down to check with front desk and maintenance to see if tenants were out of the 1130 and 1030 they gave us the greenlight to check those units while checking unit 1130 everything was dry then we moved down to unit 1030 check the walls and the floors and it was marking dry and ceilings then on the 10th floor in the hallway there was water dripping so we said to air movers pointing at the affected area and pointing in the ceiling sidenote if hallway in the 13th floor is still wet we should leave a DQ. We didn't leave DQ today because it was too cluster so we put four air movers in the hallway.

FORM VERIFIER-PLEASE CHECK BOX AND ENTER QUANTITY FOR A E& PAGES I CLUDED WITH THIS SHEET

☐ NONE

☐ OF PAGE

☐ # OF PAGE 5

☐ RECIEPT TRACKING FORMS