


PERSONNEL TRACKING

SERVICE TYPE (RESTORATION)



PTS DOC # _ELECTRONIC	FORM VERIFIER LINE # 1		Jm	JOB NUMBER-COMPLETE 101108146						
	START DATE 1/14/24	START DAY Sunday		JOB NAME Vuegica , Maria						
	STOP DATE 1/15/24	END DAY Monday		JOB ADDRESS 1970 CaterpillaDr MontgomeryL						
	SAFETY TOPIC BOOTS		TOOL BOX TRAINING COMPLETED? <input type="checkbox"/> <input type="checkbox"/>							
CREW SHEET# LAST 3 LETTERS OF JOB NAME-6 DIGIT DATE-LAST 3 #'S OF VERIFIERS JDE Ría - 11424 - 399				LOSS CAUSE	CODE	LOCATION	WEATHER	JOB STATUS		CODE VEHICLE NAME (TABLE)
				<input type="checkbox"/> FIRE	L00	Site	<input type="checkbox"/> HUMID	New <input type="checkbox"/>	RETURN	529 PICKUP, SUV OR CAR
				<input type="checkbox"/> WATER/FLOOD	L01		<input type="checkbox"/> TEMP -10	Ongoing <input type="checkbox"/>	Date - <input type="text"/>	530 VAN, PASSENGER/CARGO
				<input type="checkbox"/> WIND	L02		<input type="checkbox"/> SNOW	Comp <input type="checkbox"/>	Time - <input type="text"/>	518 TRUCK-MOVING/BOX/BOARD UP
				<input type="checkbox"/> MOLD	L03		<input type="checkbox"/> RAIN	Hold <input type="checkbox"/>	(explain why in description)	523 TRUCK, 3/4 TON PICKUP
				<input type="checkbox"/> EARTHQUAKE	L04		<input type="checkbox"/> WINDY	Other <input type="text"/>		527 TRUCK, 1 TON 4X4 W/LIFTGATE
				<input type="checkbox"/>	L05		<input type="checkbox"/>	Contact: <input type="text"/>		453 TRUCK, EXTRACTION
				<input type="checkbox"/>	L06		<input type="checkbox"/>	Lockbox / Other Code: <input type="text"/>		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	PPP - HARNESS	PER DIEM	SEE GUIDE SHEET		SHARE ROOM	SEE TABLE	PERSONNEL NAME	
		CLEARLY PRINT YOUR NAME HELPS ENSURE THE CORRECT PERSON IS BEING PAID FOR HOURS WORKED. AN ILLEGIBLE NAME MAY RESULT IN UNTIMELY OR NO PAY		24 HOUR	LUNCH	24 HOUR	CONFIRM HOURS BY PERSON														
				START TIME	START TIME	STOP TIME															
					STOP TIME																
PRINT FIRST <u>THEN</u> LAST NAME				START TIME	STOP TIME	BY OTHER									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		
SIGNATURE-END OF SHIFT																					
1	1011	1723399			2200	100	545	7.25	L00	WTR	7.25	N	N	N	N	N	N/A	N/A	N	518	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
2	1011	1907902			2200	100	545	7.25	L00	WTR	7.25	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
3	1011	1818550			2400	100	500	4.50	L00	WTR	4.50	N	N	N	N	N	N/A	N/A	N	453	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
4	1011	707			2215	100	545	7.00	L00	WTR	7.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
5	1011	707			2215	100	545	7.00	L00	WTR	7.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
6	1011	707			2215	100	545	7.00	L00	WTR	7.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
7	1011	707			2215	100	545	7.00	L00	WTR	7.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
8	1011	707			2215	100	545	7.00	L00	WTR	7.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						130													<input type="checkbox"/> RENTAL	Jm	
9												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		
10												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		
11												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		
12												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		
13												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		
14												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		

RESPONSIBILITY OF APPROVER: PLEASE COMPLETE ALL REQUESTS BELOW		↑VERIFY TOTAL HRS		↑VERIFY TOTAL HRS		VERIFICATION OF PTS DATA		APPROVER SIGNATURE TO VERIFY FORM IS COMPLETED	
STEP 1-PRINT APPROVER NAME	STEP 2-DID THE FORM VERIFIER REVIEW THIS FORM FOR COMPLETION? <input type="checkbox"/> <input type="checkbox"/>	STEP 3-TOTAL HRS	THESE TWO TOTALS SHOULD MATCH	STEP 4-PHASE HRS	STEP 5 - DOES THE PTS COVER:		STEP 6-APPROVER SIGNATURE		
Jordan Hankey	IF "N", YOU MUST VERIFY & COMPLETE ALL OUTSTANDING ISSUES INCLUDING TOP SECTION OF FORM	54	↔	54	<input type="checkbox"/> WHO <input type="checkbox"/> WHERE <input type="checkbox"/> WHEN WORK DESC: <input type="checkbox"/> WHAT <input type="checkbox"/> WHERE <input type="checkbox"/> WHY <input type="checkbox"/> HOW				

Arrived at belfor. Met with technicians and helpers. Loaded truck and drove to work location. Met with the contact on site. Got work authorization signed. Began extraction. Contact stated he wanted both rugs thrown away in the affected areas as well as ceiling tiles. Got disposal form signed to take them out. Took moisture readings and got approval to pull base. Confused extraction. It stryszyk showed up with extraction truck and began using that in areas while base was being pulled. Took out carpets and ceiling tiles. Marked moisture log. After all base and extraction was finished we set equipment on affected areas. Cleaned floors and wiped down contents. Taped down cords. Spoke with on site employee. Took and uploaded photos. Drove back to shop. Drew map. Finished paperwork.

FORM VERIFIER-PLEASE CHECK BOX AND ENTER QUANTITY FOR A E& PAGES INCLUDED WITH THIS SHEET ☐ NONE ☐ OF PAGE ☐ # OF PAGE 5 ☐ RECIEPT TRACKING FORMS