

PTS DOC#  
ELECTRONIC

FORM VERIFIER LINE # 1

INITIALS Bn

JOB NUMBER-COMPLETE

START DATE

9/3/24

START DAY

Tuesday

STOP DATE

9/3/24

END DAY

Tuesday

CREW SHEET#

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

NIE

-

90324

-

109

JOB NAME

Dougherty, Ken & Connie

JOB ADDRESS

1105 McCall Ct  
RochelleIL

SAFETY TOPIC

Steel toe

TOOL BOX TRAINING COMPLETED?

LOSS CAUSE

CODE

LOCATION

WEATHER

☐ FIRE

L00

Site

☐ WATER/FLOOD

L01

☐ WIND

L02

☐ MOLD

L03

☐ EARTHQUAKE

L04

☐

L05

☐

L06

☐ HUMID

73

☐ TEMP

☐ SNOW

☐ RAIN

☐ WINDY

☐

☐

New

Ongoing

Comp

Hold

(explain why in description)

Other

Contact:

Lockbox / Other Code:

JOB STATUS

RETURN

CODE

VEHICLE NAME (TABLE)

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					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	1793109	Brian Nork		700	1200 1230	1630	9.00	L00	CLN	9.00	N	N	N	N	N	Na	Na	N	527		VERIFIER	
2	1011	707	Esp eranza oso rio		700	1200 1230	1630	9.00	L00	CLN	9.00	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
3	1011	707	Andres aristiza ba l		700	1200 1230	1630	9.00	L00	CLN	9.00	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
4	1011	707	Leonardo dia z		700	1200 1230	1630	9.00	L00	CLN	9.00	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
5												N	N	N	N	N			N			VERIFIER	
6												N	N	N	N	N			N			VERIFIER	
7												N	N	N	N	N			N			VERIFIER	
8												N	N	N	N	N			N			VERIFIER	
9												N	N	N	N	N			N			VERIFIER	
10												N	N	N	N	N			N			VERIFIER	
11												N	N	N	N	N			N			VERIFIER	
12												N	N	N	N	N			N			VERIFIER	
13												N	N	N	N	N			N			VERIFIER	
14												N	N	N	N	N			N			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?

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

STEP 3-TOTAL HRS

36

THESE TWO TOTALS SHOULD MATCH

STEP 4-PHASE HRS

36

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

Got to the shop load up the truck with equipment materials we need it for today. Drove to Rochelle upon arrival met the home owner entered the house and started cleaning by wiping down walls and light fixtures on first floor. Then we went downstairs and wiped down walls and ceilings. We also wiped down banister going to base ment. Cleaned up and took all garbage out of house . Locked up all windows and doors. Then head back to shop.