

PERSONNEL TRACKING
SERVICE TYPE (RESTORATION)



PTS DOC# - ELECTRONIC	FORM VERIFIER LINE # 1		INITIALS Jt	JOB NUMBER-COMPLETE		LOSS CAUSE		CODE	LOCATION	WEATHER		JOB STATUS		CODE VEHICLE NAME (TABLE)				
	START DATE		START DAY		101108164		<input type="checkbox"/> FIRE		L00	Site	<input type="checkbox"/> HUMID		New <input type="checkbox"/> RETURN		529 PICKUP, SUV OR CAR			
	1/17/24		Wednesday				<input type="checkbox"/> WATER/FLOOD		L01		<input type="checkbox"/> TEMP 0		Ongoing <input type="checkbox"/> Date -		530 VAN, PASSENGER/CARGO			
	STOP DATE		END DAY		JOB NAME		<input type="checkbox"/> WIND		L02		<input type="checkbox"/> SNOW		Comp <input type="checkbox"/> Time -		518 TRUCK-MOVING/BOX/BOARD UP			
	1/17/24		Wednesday		Ascension Mercy Medical Center		<input type="checkbox"/> MOLD		L03		<input type="checkbox"/> RAIN		Hold <input type="checkbox"/> (explain why in description)		523 TRUCK, 3/4 TON PICKUP			
CREW SHEET# LAST 3 LETTERS OF JOB NAME-6 DIGIT DATE-LAST 3 #'S OF VERIFIERS JDE					JOB ADDRESS					<input type="checkbox"/> EARTHQUAKE		L04		<input type="checkbox"/> WINDY		527 TRUCK, 1 TON 4X4 W/LIFTGATE		
TER - 11724 - 550					1330 N LA KEST A URRORAIL					<input type="checkbox"/>		L05		Other		453 TRUCK, EXTRACTION		
					SAFETY TOPIC PPE					TOOL BOX TRAINING COMPLETED? <input type="checkbox"/> <input type="checkbox"/>					Contact:		N/A NO VEHICLE	
															Lockbox / Other Code:		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	
		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									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	START TIME	STOP TIME															BY OTHER
					STOP TIME																
		PRINT FIRST <u>THEN</u> LAST NAME		START TIME	STOP TIME	STOP TIME													SIGNATURE-END OF SHIFT		
1	1011	1818550	Jt stryszyk		1500	0	2045	5.75	L00	EME	5.75	N	N	N	N	N	N/A	N/A	N	530	VERIFIER
						0													<input type="checkbox"/> RENTAL	Jt	
2	1011	1793109	Brian nork		1600	0	2000	4.00	L00	EME	4.00	N	N	N	N	N	N/A	N/A	N	530	VERIFIER
						0													<input type="checkbox"/> RENTAL	Jt	
3	1011	707	Jh on plaza		1645	0	2045	4.00	L00	EME	4.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						0													<input type="checkbox"/> RENTAL	Jt	
4	1011	707	Jh on A		1645	0	2045	4.00	L00	EME	4.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						0													<input type="checkbox"/> RENTAL	Jt	
5	1011	707	Jorge valles		1645	0	2045	4.00	L00	EME	4.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						0													<input type="checkbox"/> RENTAL	Jt	
6	1011	707	Cesa r ponte		1645	0	2045	4.00	L00	EME	4.00	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER
						0													<input type="checkbox"/> RENTAL	Jt	
7												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		
8												N	N	N	N	N			N		VERIFIER
																			<input type="checkbox"/> RENTAL		
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					25.75		↔		25.75		<input type="checkbox"/> WHO <input type="checkbox"/> WHERE <input type="checkbox"/> WHEN				<i>Jordan Hankey</i>			
												WORK DESC: <input type="checkbox"/> WHAT <input type="checkbox"/> WHERE <input type="checkbox"/> WHY <input type="checkbox"/> HOW									
WORK DESCRIPTION: BASED ON LOCATION(S) WORKED AND PHASE CODE(S), PLEASE DESCRIBE WHAT WORK THE CREW PERFORMED																					

Me and Ja son were the first on site. Ja son got the work auth signed and we walked the affected area the maintenance staff was cleaning up the water and they did a pretty good job. There were a couple rooms that still needed to be extracted. I was extracting the last couple rooms and then waited for back up so I did some paper work. When Brian and the temps got on site I had the temps helping get equipment out of the van and start putting it in rooms. Once they did that I had them mop the entire affected area. While they were doing that me and Brian were taking moisture readings, setting up equipment and getting t numbers off of the equipment. We unloaded too much equipment at first because we thought more walls would be wet but it was all rubber base and plaster and the water was cleaned up quickly so there were minimal walls that were saturated. While the temps were finishing mopping I was sketching out the affected area, I wasn't able to finish because my phone died. We need to go back tomorrow and check.