

PERSONNEL TRACKING
SERVICE TYPE (RESTORATION)



PTS DOC# -ELECTRONIC	FORM VERIFIER LINE # 1		INITIALS Jt	JOB NUMBER-COMPLETE	
	START DATE		START DAY	101108492	
	9/6/24		Friday	JOB NAME	
	STOP DATE		END DAY	Schriks, Kay	
	9/6/24		Friday	JOB ADDRESS	
CREW SHEET#				4728 Wolf Rd	
LAST 3 LETTERS OF JOB NAME-6 DIGIT DATE-LAST 3 #'S OF VERIFIERS JDE				WesterrSprings IL	
KAY - 90624 - 550				SAFETY TOPIC PPE	
				TOOL BOX TRAINING COMPLETED? <input type="checkbox"/> <input type="checkbox"/>	

☐ FIRE
☐ WATER/FLOOD
☐ WIND
☐ MOLD
☐ EARTHQUAKE
☐
☐

CODE
L00
L01
L02
L03
L04
L05
L06

LOCATION
Site

☐ HUMID
☐ TEMP 70
☐ SNOW
☐ RAIN
☐ WINDY
☐
☐

WEATHER

New ☐

Ongoing ☐

Comp ☐

Hold ☐

Other ☐

Contact:

Lockbox / Other Code:

RETURN

Date -

Time -

(explain why in description)

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	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		700	1200	1800	10.50	L00	DMO	10.50	N	N	N	N	N	N/A	N/A	N	530	VERIFIER	
						1230													<input type="checkbox"/> RENTAL	Jt		
2	1011	707	Wilson rodriguez		700	1200	1800	10.50	L00	DMO	10.50	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER	
						1230													<input type="checkbox"/> RENTAL	Jt		
3	1011	203883	Matthew hankey		800	1200	1400	5.50	L00	DMO	5.50	N	N	N	N	N	N/A	N/A	N	529	VERIFIER	
						1230													<input type="checkbox"/> RENTAL	Jt		
4	1011	1914491	CJ tulk		1330	0	1745	4.25	L00	DMO	4.25	N	N	N	N	N	N/A	N/A	N	518	VERIFIER	
						0													<input type="checkbox"/> RENTAL	Jt		
5	1011	707	Ruben Guerrero		1330	0	1800	4.50	L00	DMO	4.50	N	N	N	N	N	N/A	N/A	N	N/A	VERIFIER	
						0													<input type="checkbox"/> RENTAL	Jt		
6												N	N	N	N	N			N		VERIFIER	
																			<input type="checkbox"/> RENTAL			
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		35.25		↔		35.25		<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

We got to the shop and loaded up for the day. I drove to the job site. I then went in and checked moisture readings, updated the moisture log, and equipment log. We then moved a few more pieces of furniture before we started demo. We took off the countertop and bottom cabinets on the exterior wall as well as the cabinets over the fridge. We had to cap the valves to the kitchen sink and cut a hole in the bottom of the cabinet to get the sink supply lines out. We then took out the soffit in the kitchen and the back wall that the cabinets were on. We removed the backslash drywall and all of the insulation that was affected. We started removing the hard wood flooring. We finished removing the flooring in the living room and in the dining room. We did not take out the island yet so we did not remove the flooring in the kitchen. We removed all of the nails in the sub floor. Before we left we hepa vacuumed the wall cavities, the floors, the fridge, and blinds.