PERSONNEL TRACKING
SERVICE TYPE (RESTORATION)

BELFOR PROPERTY RESTORATION

PTS DOC # ELECTRONIC				
FORM VERIFIER LINE # 1	**INITIALS** Da			
START DATE 9/5/24	**START DAY** Thursday			
STOP DATE 9/5/24	**END DAY** Thursday			

JOB NUMBER-COMPLETE
101 108460

JOB NAME
2626 N Lakeview

JOB ADDRESS
2626 N LakeviewAve
Chicago IL

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

IEW - 90524 - 902

SAFETY TOPIC
BOOTS

TOOL BOX TRAINING COMPLETED? ☐ ☐

LOSS CAUSE / CODE
- ☐ FIRE — L00
- ☐ WATER/FLOOD — L01
- ☐ WIND — L02
- ☐ MOLD — L03
- ☐ EARTHQUAKE — L04
- ☐ — L05
- ☐ — L06

LOCATION
Site

WEATHER
- ☐ HUMID
- ☐ TEMP 71
- ☐ SNOW
- ☐ RAIN
- ☐ WINDY
- ☐

JOB STATUS
- New ☐
- Ongoing — Date -
- Comp ☐ — Time -
- Hold ☐ (explain why in description)
- Other ☐
- Contact: ☐
- Lockbox / Other Code: ☐

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 (PRINT FIRST THEN LAST NAME)	RATE CLASS	24 HOUR START TIME	LUNCH START/STOP TIME	24 HOUR STOP TIME	TOTAL HOURS / CONFIRM HOURS BY OTHER	LOCATION CODE	PHASE CODE	HOURS BY PHASE	SMALL TOOLS	PPE	PRP-FIT TEST	PFP-HARNESS	PER DIEM	HOTEL NAME CODE	HOTEL ROOM #	SHARE ROOM	VEHICLE CODE	SIGNATURE-END OF SHIFT
1 / 1011	1907902	Dylan Archer	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	518 ☐RENTAL	VERIFIER Da
2 / 1011	707	Antonio lopez	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	N/A ☐RENTAL	VERIFIER Da
3 / 1011	707	Jose Lopez	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	N/A ☐RENTAL	VERIFIER Da
4 / 1011	1793109	Brian Nork	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	518 ☐RENTAL	VERIFIER Da
5 / 1011	707	Liz Forero	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	N/A ☐RENTAL	VERIFIER Da
6 / 1011	707	Pedro Forero	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	N/A ☐RENTAL	VERIFIER Da
7 / 1011	707	Esperanza Osorio	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	N/A ☐RENTAL	VERIFIER Da
8 / 1011	707	Andres Aristizabal	700	1200 / 1230	1800	10.50	L00	DMO	10.50	N	N	N	N	N	Na	Na	N	N/A ☐RENTAL	VERIFIER Da
9										N	N	N	N	N			N	☐RENTAL	VERIFIER
10										N	N	N	N	N			N	☐RENTAL	VERIFIER
11										N	N	N	N	N			N	☐RENTAL	VERIFIER
12										N	N	N	N	N			N	☐RENTAL	VERIFIER
13										N	N	N	N	N			N	☐RENTAL	VERIFIER
14										N	N	N	N	N			N	☐RENTAL	VERIFIER

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? ☐ ☐ IF "N", YOU MUST VERIFY & COMPLETE ALL OUTSTANDING ISSUES INCLUDING TOP SECTION OF FORM	STEP 3-TOTAL HRS 84	THESE TWO TOTALS SHOULD MATCH ⟷	STEP 4-PHASE HRS 84	STEP 5 - DOES THE PTS COVER: ☐WHO ☐WHERE ☐WHEN / WORK DESC: ☐WHAT ☐WHERE ☐WHY ☐HOW	STEP 6-APPROVER SIGNATURE
Jordan Hankey						Jordan Hankey

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

Special Notes
CAT 3 water loss
Unless all originally and currently affected building materials are not removed we need a release of liability form
Current Unit Status
Units complete (no more work needed)
Units complete waiting for rebuild to complete demo of other bathroom
Units waiting for demo
Units waiting for approval
Units in question (possibly going with insurance)
Unit 1301 (Source Unit)
Not visited today
No further work is needed
No equipment in unit
Unit 1201
Not visited today
Recommend master bathroom demo after the guest bathroom is rebuilt. (Unit is occupied a usable restroom is required)
Equipment in unit until demo is fully complete
Unit 1101 (Dylan)

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 ☐