

PERSONNEL TRACKING  
SERVICE TYPE (RESTORATION)



PTS DOC #  
ELECTRONIC

FORM VERIFIER LINE # 1  
INITIALS CT  
START DATE 9/6/24  
STOP DATE 9/6/24  
START DAY Friday  
END DAY Friday

CREW SHEET#  
LAST 3 LETTERS OF JOB NAME-6 DIGIT DATE-LAST 3 #'S OF VERIFIERS JDE  
SOC - 90624 - 491

JOB NUMBER-COMPLETE  
101108448

JOB NAME  
Arbor 40 Condo Assoc

JOB ADDRESS  
1S095 Spring Rd  
OakbrookTerracell

SAFETY TOPIC  
PPE

TOOL BOX TRAINING COMPLETED?  
☐ ☐

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

CODE  
L00  
L01  
L02  
L03  
L04  
L05  
L06

LOCATION  
Site

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

JOB STATUS  
New ☐  
Ongoing ☐  
Comp ☐  
Hold ☐  
Other ☐  
Contact:  
Lockbox / Other Code:

RETURN  
Date -  
Time -  
(explain why in description)

CODE  
529  
530  
518  
523  
527  
453  
N/A

VEHICLE NAME (TABLE)  
PICKUP, SUV OR CAR  
VAN, PASSENGER/CARGO  
TRUCK-MOVING/BOX/BOARD UP  
TRUCK, 3/4 TON PICKUP  
TRUCK, 1 TON 4X4 W/LIFTGATE  
TRUCK, EXTRACTION  
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			START TIME	LUNCH START TIME STOP TIME	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		
		PRINT FIRST THEN LAST NAME						BY OTHER															
		SIGNATURE-END OF SHIFT																					
1	1011	1914491	CJ Tulk		1200	0 0	1330	1.50	L00	JBC	1.50	N	N	N	N	N	NA	NA	N	518	<input type="checkbox"/> RENTAL	VERIFIER CT	
2	1011	707	Ruben Guerrero		1200	0 0	1330	1.50	L00	JBC	1.50	N	N	N	N	N	NA	NA	N	N/A	<input type="checkbox"/> RENTAL	VERIFIER CT	
3												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
4												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
5												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
6												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
7												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
8												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
9												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
10												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
11												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
12												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
13												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	VERIFIER		
14												N	N	N	N	N			N	<input type="checkbox"/> RENTAL	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  
3

THESE TWO TOTALS SHOULD MATCH  
↔

STEP 4-PHASE HRS  
3

STEP 5 - DOES THE PTS COVER:  
WHO WHERE WHEN  
WORK DESC: WHAT WHERE WHY HOW

STEP 6-APPROVER SIGNATURE  
Jordan Hankey

VERIFICATION OF PTS DATA

APPROVER SIGNATURE TO VERIFY FORM IS COMPLETED

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

Today we checked moisture levels of the sub floor in the crawl space and pulled all remaining equipment left along with containment.