

PTS DOC#  
ELECTRONIC

FORM VERIFIER LINE # 1

INITIALS DA

JOB NUMBER-COMplete

START DATE

1/20/24

START DAY

Sa turday

STOP DATE

1/20/24

END DAY

Sa turday

CREW SHEET#

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

ERA - 12024 - 902

101108180

JOB NAME

Nuera

JOB ADDRESS

16280 E TwomblyRd  
RochelleIL

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

Tra ve l

WEATHER

☐ HUMID

☐ TEMP -2

☐ SNOW

☐ RAIN

☐ WINDY

☐

☐

JOB STATUS

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			START TIME	START 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														VEHICLE CODE	
		24 HOUR	LUNCH																				24 HOUR
1	1011	1907902	Dylan Archer		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	530		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
2	1011	1715985	Maurilio Munoz		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	518		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
3	1011	707	Liz Forero		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
4	1011	707	Michael Mendez		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
5	1011	707	Roberto Vasquez		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
6	1011	707	Cesa r Ponte		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
7	1011	707	Jorge Valles		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
8	1011	707	John Ponte		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
9	1011	707	John Plaza		600	1200	1915	12.75	L00	CLN	12.75	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230													<input type="checkbox"/> RENTAL		Da		
10	1011	707	Je sus Valero		700	1200	1900	11.50	L00	CLN	9.50	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230			L01	TVL	2.00								<input type="checkbox"/> RENTAL		Da		
11	1011	707	Antonio Lopez		700	1200	1900	11.50	L00	CLN	9.50	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230			L01	TVL	2.00								<input type="checkbox"/> RENTAL		Da		
12	1011	707	Jose Lopez		700	1200	1900	11.50	L00	CLN	9.50	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230			L01	TVL	2.00								<input type="checkbox"/> RENTAL		Da		
13	1011	707	Brailyn Lopez		700	1200	1900	11.50	L00	CLN	9.50	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230			L01	TVL	2.00								<input type="checkbox"/> RENTAL		Da		
14	1011	707	Ruben Guerrero		700	1200	1900	11.50	L00	CLN	9.50	N	N	N	N	N	Na	Na	N	N/A		VERIFIER	
						1230			L01	TVL	2.00								<input type="checkbox"/> RENTAL		Da		

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?

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☐

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

STEP 3-TOTAL HRS

172.25

THESE TWO TOTALS SHOULD MATCH

←→

STEP 4-PHASE HRS

172.25

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

Arrived at Belfor. Met with technicians. Loaded truck. Left to job. Made contact with manager and walked the job. Unloaded truck. Se t air scru bbers in the warehouse . We noticed water coming from the ceiling. We covered fragile wires from the water coming from the ceiling with plastic. We also made a containment from the warehouse to the rest of building. Upon request from manager we also made a containment covering the extraction laboratory. We started cleaning from the north side and worked our way to the south side of the warehouse . Using hepa vacuums, towels, and degrease r. We acquired scisso r lifts mid day and continued higher on the walls and pipes with the cleaning. We then moved all equipment out of the way. Loaded truck and se nt update. Left to sh op.

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

☐

SIMPSON 052317

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