



## FIRE SPRINKLER

### DAILY STATUS UPDATE

Employee Name: \_\_\_\_\_ Project Name: \_\_\_\_\_

What was completed today? \_\_\_\_\_ Date: \_\_\_\_\_

#### Fire Sprinkler Installation

- \_\_\_\_\_ # heads installed – upright
- \_\_\_\_\_ # heads installed – pendants
- \_\_\_\_\_ # feet trenched
- \_\_\_\_\_ # lines and mains installed
- \_\_\_\_\_ # sway bracing installed
- \_\_\_\_\_ # valves
- \_\_\_\_\_ # risers
- \_\_\_\_\_ # FDC
- \_\_\_\_\_ Other/comment(s):

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Was any of the work completed today not part of the original plans? Yes No

Is it a change order? Yes No

If yes, explain: \_\_\_\_\_

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Did I meet today's goals? Yes No

If no, explain: \_\_\_\_\_

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Are there additional materials needed? Yes No

Explain: \_\_\_\_\_

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Is there additional equipment needed? Yes No

Explain: \_\_\_\_\_

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Are there materials that are no longer needed for the project? Yes No

If yes, what: \_\_\_\_\_

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Is there any equipment that is no longer needed for the project? Yes No

If yes, what: \_\_\_\_\_

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## The Rainier Group Fire Systems

Any issues that the supervisor should know about? Yes No  
Explain: \_\_\_\_\_

Were all safety protocols followed? Yes No  
If no, explain: \_\_\_\_\_

Were there any work-related injuries? Yes No  
*If yes, give details and contact supervisor immediately.* \_\_\_\_\_

Next Day's Goals

Date: \_\_\_\_\_

Fire Sprinkler

- \_\_\_\_\_ # heads installed – upright
- \_\_\_\_\_ # heads installed – pendants
- \_\_\_\_\_ # feet trenched
- \_\_\_\_\_ # lines and mains installed
- \_\_\_\_\_ # sway bracing installed
- \_\_\_\_\_ # valves
- \_\_\_\_\_ # risers
- \_\_\_\_\_ # FDC
- \_\_\_\_\_ Other/comment(s):

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