Form

OCC BOOK IN & BRIEFING FORM

HITACHI

Hitachi Rail Honolulu JV

Department:			**Date:**	
Location:			**Shift:**	
Briefed By	**Name:**		**ID No.**	
	Position:		**Signature:**	

Briefing Notes:

No.	ID No.	Name	Time In	Signature	Time Out	Signature	Remarks
01							
02							
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Approved By: **Signature:** **Date:**	☐ Director, Operations and Maintenance	☐ Department Manager	☐ Manager, HSE (Operations and Maintenance)