



**CONTRACTORS'S DAILY RECORD
OF
CONSTRUCTION OPERATIONS**

Project _____
 Contractor/Subcontractor _____

 Date _____
 Shift _____ To _____
 Weather/Temp. _____

Description and Location of Work

- A _____
- B _____
- C _____
- D _____
- E _____
- F _____
- G _____
- H _____
- I _____
- J _____

NO.	LABOR CLASSIFICATION	A	B	C	D	E	F	G	H	I	J	TOTAL WORK TIME
		PRODUCTION TIME (Work Hours)										



US DEPARTMENT OF TRANSPORTATION
Federal Highway Administration

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NO.	EQUIPMENT TYPE	A	B	C	D	E	F	G	H	I	J	TOTAL WORK TIME	IDLE *
		PRODUCTION TIME (Equipment Hours)											

* B = Broken Down, W = No Available Work, P = No Operator, S = Suspended

Traffic Control Checked YES NO
 Erosion Control Checked YES NO
 Unsafe Operations YES NO

Traffic Control Problems YES NO
 Erosion Control Problems YES NO
 Accidents YES NO

NARRATIVE REPORT: *Descriptions, Problems, Visitors, Materials Received, etc.*

It is hereby certified that the information contained in this record is accurate, and that all work documented herein complies with the requirements of the contract. Any exceptions to this certification are documented as a part of this record.

ITEM NO.	DESCRIPTION	LOCATION - STATIONS	QTY.	REMARKS

REVIEWED BY		REPORTED BY	
SIGNATURE (<i>Project Engineer</i>)	DATE	SIGNATURE (<i>Contractor Representative</i>)	DATE