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| DDOT Contract No:DCKA -       - C       | Project Name:      | Location:      | Date:      |
| FAP No:      | Contractor:      | Construction Manager:      | Day of Week:      |
| Ward:      | Prepared By:      | Title:      | [ ]  DDOT [ ]  Consultant  |
| High Temp:       | AM Conditions:      | PM Conditions:      | Contract Day No.      | Total Contract Days      |
| Low Temp:       |
| *(check most applicable):* Sunny [ ]  Partly Cloudy [ ]  Cloudy [ ]  Rain [ ]  Rain Duration (hours)       |

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|  |  **Contractor(s) and Personnel** |
| # |  Company Name | DBE | Type | # | Hrs | Type | # | Hrs | Type | # | Hrs |
| 1. |      Prime [ ]  Sub [ ]  Utility [ ]  | [ ]  | Foremen |       |       | Truck Drivers |       |       | Operators |       |       |
| Finishers |       |       | Laborers |       |       | Trainees |       |       |
| 2. |      Prime [ ]  Sub [ ]  Utility [ ]  | [ ]  | Foremen |       |       | Truck Drivers |       |       | Operators |       |       |
| Finishers |       |       | Laborers |       |       | Trainees |       |       |
| 3. |      Prime [ ]  Sub [ ]  Utility [ ]  | [ ]  | Foremen |       |       | Truck Drivers |       |       | Operators |       |       |
| Finishers |       |       | Laborers |       |       | Trainees |       |       |
| 4. |      Prime [ ]  Sub [ ]  Utility [ ]  | [ ]  | Foremen |       |       | Truck Drivers |       |       | Operators |       |       |
| Finishers |       |       | Laborers |       |       | Trainees |       |       |
| 5. |      Prime [ ]  Sub [ ]  Utility [ ]  | [ ]  | Foremen |       |       | Truck Drivers |       |       | Operators |       |       |
| Finishers |       |       | Laborers |       |       | Trainees |       |       |
|  |  |
|  | **Contractor(s) Subcontractor(s) Equipment (Active or Idle)** |
| Prime | Sub | Equipment | A/Hrs | I/Hrs | Prime | Sub | Equipment | A/Hrs | I/Hrs | Prime | Sub | Equipment | A/Hrs | I/Hrs |
|  |  | Air Compressor |  |  |  |  | Dragline |  |  |  |  | Pumps |  |  |
|  |  | Arrow Board |  |  |  |  | Earth Mover |  |  |  |  | Roller Steel |  |  |
|  |  | Asphalt Paver |  |  |  |  | Front End Loader |  |  |  |  | Roller Rubber |  |  |
|  |  | Asphalt Distributor |  |  |  |  | Hand Tamp |  |  |  |  | Roller Vibrator |  |  |
|  |  | Backhoe |  |  |  |  | Generator |  |  |  |  | Rotary Mixer |  |  |
|  |  | Bulldozer |  |  |  |  | Grade-all |  |  |  |  | Track-Hoe |  |  |
|  |  | Concrete Saw |  |  |  |  | Light Plants |  |  |  |  | Truck - Dump |  |  |
|  |  | Concrete Screed |  |  |  |  | Mechanical Tamp |  |  |  |  |  |  |  |
|  |  | Concrete Vibrator |  |  |  |  | Milling Machine |  |  |  |  |  |  |  |
|  |  | Crane Truck |  |  |  |  | Motor Grader |  |  |  |  |  |  |  |
|  |  | Curb Machine |  |  |  |  | Pile Driver |  |  |  |  |  |  |  |
|  |  | Drill Rig |  |  |  |  | Power Broom |  |  |  |  |  |  |  |

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|  | **Quantities / Work Performed** |
| **Pay Item #** | **Item Description** | **Delivery Ticket # (if applicable)** | **Load #** | **Location (Station to Station)** | **Installed** |
| **Qty.** | **Units** |
|       |       |       |       |       |       |       |
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| Project Name:      | Contractor:      | Day of Week:      | Date:      |
| **Work Summary / Remarks** |
| General: |
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| Materials Delivered to Site: |
|  |
| Accidents:[ ] No [ ] Yes See Accident Report Dated:       | Accident Report No (if available):      |
| **VISITORS:** |
| No. | Name | Representing | Reason for Visit | Time In | Time Out |
| 1 |       |       |       |       |       |
| 2 |       |       |       |       |       |
| 3 |       |       |       |       |       |
| INSPECTOR’S SIGNATURE: | HOURS AT JOB SITE | TOTAL HOURS |
|  | FROM:       | TO:       |       |
| CONSTRUCTION MANAGER’S SIGNATURE |
|  | DATE:       |

DISTRIBUTION: Original – File

 Copy – Contractor (as requested)

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| Project Name:      | Contractor:      | Day of Week:      | Date:      |

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|  | **Quantities / Work Performed (continuation sheet)** |
| **Pay Item #** | **Item Description** | **Delivery Ticket # (if applicable)** | **Load #** | **Location (Station to Station)** | **Installed** |
| **Qty.** | **Units** |
|       |       |       |       |       |       |       |
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| Project Name:      | Contractor:      | Day of Week:      | Date:      |

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| Progress Photographs |

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| Project Name:      | Contractor:      | Day of Week:      | Date:      |

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| Progress Photographs |

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