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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 |  | |  | |
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|  | **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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