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|-----------|------------------------|
| DATE: | DAY: Su M Tu W Th F Sa |
| PROJECT: | CONTRACT NO.: |
| LOCATION: | FOREMAN: |

| WEATHER | | SITE CONDITION | | VISITORS |
|---------------------------------|--------------------------------|--------------------------------|--------------------------------|----------|
| <input type="checkbox"/> RAIN | <input type="checkbox"/> SNOW | <input type="checkbox"/> CLEAR | <input type="checkbox"/> DUSTY | |
| <input type="checkbox"/> CLOUDY | <input type="checkbox"/> WINDY | <input type="checkbox"/> MUDDY | <input type="checkbox"/> | |
| <input type="checkbox"/> SUNNY | <input type="checkbox"/> | TEMPERATURE RANGE: | | |
| HOURS LOST DUE TO BAD WEATHER | | | | |
| | | | | |
| | | | | |

| SCHEDULE | PROBLEMS / DELAYS |
|-------------------------|-------------------|
| COMPLETION DATE: | |
| DAYS AHEAD OF SCHEDULE: | |
| DAYS BEHIND SCHEDULE: | |

| SAFETY ISSUES | ACCIDENTS / INCIDENTS |
|---------------|-----------------------|
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| | |

| SUMMARY OF WORK PERFORMED TODAY |
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|------|-----------|
| NAME | SIGNATURE |
|------|-----------|