[Your company name]
[Street address] · [City, State ZIP]
[Phone] · [Email] · [Website]
License # [License #]

Daily job log

Date _____
Log # _____

Project _____ Job # _____

Project address _____

Prepared by _____ Day _____

WEATHER

☐ Sunny ☐ Partly cloudy ☐ Cloudy ☐ Rain ☐ Snow ☐ Windy

Temp high / low _____ Work affected? _____

CREW ON SITE

NAME	ROLE	TIME IN	TIME OUT	HOURS

SUBCONTRACTORS

COMPANY	TRADE	WORKERS	WORK PERFORMED

DELIVERIES

SUPPLIER	ITEMS DELIVERED	RECEIVED BY	CONDITION / NOTES

WORK COMPLETED TODAY

By area or trade: what got done, and what percent of each task is finished

INSPECTIONS

INSPECTION	INSPECTOR	RESULT	NOTES

Result: pass, fail or partial. Note any corrections the inspector asked for.

ISSUES AND DELAYS

Problems found, delays, questions for the client or designer, and who is handling each

SAFETY

☐ Toolbox talk held ☐ PPE in use ☐ Site secured at end of day ☐ Incident or near miss (describe below)

PHOTOS

Photos taken: ☐ Yes ☐ No

Number of photos _____ Saved to _____

NEXT STEPS

Plan for the next workday: crew, deliveries, inspections, and decisions needed from the client

Prepared by

_____
Signature

_____ _____
Printed name Date