Form BC-101

# INSPECTOR'S DAILY REPORT

Project No. _____ Day & Date _____

Weather _____ Temperature: High _____ Low _____

Work Day _____ Time Work Started _____ Stopped _____ Hours worked _____

Contractor's Forces: Supt. _____ Foreman _____

Operators _____ Laborers: Skilled _____ Unskilled _____ Others _____

Engineering Personnel: _____

## Contractor's Equipment on Project

| Number & Type | Operating | Not Oper. | Reason Not Operating |
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## DETAILS OF DAILY OPERATIONS

_____

Inspector

Visitors: _____