

Job Stamp
 04-0120F4
 SFOBB SAS

Const. Calendar Day No. 589
 Project Work Day No. 799
 Date **Thursday 07/24/2008**
 Shift Hours Start _____ Stop _____

ASSISTANT RESIDENT ENGINEER'S **CONTRACTOR – ABFJV**

EQUIPMENT AND/OR LABOR:			HOURS - ITEM NO.										IDLE OR DOWN	REMARKS			
Equip. #	N O M E N	DESCRIPTION (Of Equipment or Labor)															Name

Field work:

- Observed contractor's efforts at temporary tower A. All survey control points were occupied by the contractor, therefore I was not able to check placement of the tower at this intermediate stage of construction. I will check the placement of the temporary towers after the contractor has made final adjustments to the tower, and before the truss sections are placed.



David Bradd, Assistant Resident Engineer