WEST COAST FIRESTOPPING, INC
1130 W. Trenton Ave Orange, CA 92867
Phone: (714) 935-1104 | Fax: (714) 935-1932

NO. _____

TIME & MATERIAL DAILY LOG

PROJECT NAME: _____ **WCF JOB No:** _____

CONTRACTOR: _____

LABOR USED			
DATE	TECHNICIAN NAME	REG. HOURS	OT HOURS

DESCRIPITION OF WORK (Include location(s) of work)

MATERIAL USED	QUANTITY

EQUIPMENT USED	QUANTITY
LIFT/ SCAFFOLD YES _____ NO _____	
MATERIAL/EQUIPMENT - DELIVERY/PICK UP YES _____ NO _____	
PARKING YES _____ NO _____	

Contractors Representative: X

Print Name:

Date:

The above work and material has been received and inspected and is accepted as satisfactory and subject to terms and conditions listed below. ***Terms & Conditions:*** *All invoices net, due & payable immediately upon presentation, unless special arrangements made and approved by our credit department. Maximum legal rate of interest will be charged on all accounts after due date, and, in event collection is necessary, reasonable attorney's fees will be added. Sales tax will be charged wherever applicable.*

WCF PM Approval

COR _____

DB _____

WHITE - WCF Copy

YELLOW - Customer Copy