



# Construction Daily Report

Company name	Date	Location
<input type="text"/>	<input type="text"/>	<input type="text"/>
Weather conditions (AM)	Weather conditions (PM)	High temperature
<input type="text"/>	<input type="text"/>	<input type="text"/>
		Low temperature
		<input type="text"/>

## Project Details

Project identifier (e.g. job name or number)	No. of days into the project	Expected completion date
<input type="text"/>	<input type="text"/>	<input type="text"/>

## Crew Information

Crew member	Role	Hours of work
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

## Equipment Information

Equipment type	Vehicle number	Hours in operation
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Delivery Information

Material(s)	Expected arrival	Actual arrival

Issues/Delays	Description	Hours delayed (if applicable)

Additional/Notable events (if applicable)

Visitors

Name	Title	Purpose

Safety

Inspection performed?   ☐ Yes   ☐ No

Incident(s)?   ☐ Yes(box to explain)   ☐ No

Additional Information

Comments/Remarks	Action items

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_