OFF-SITE WORK CREW DAILY LOG

Work Crew Type/Assignment _____ Date _____

Destination(s) _____

WORKER NAME	DOC NUMBER	LIVING UNIT
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

INSPECTION	TIME	SEARCH	TIME
Tool inventory - beginning of shift		Vehicle - beginning of shift	
Tool inventory - mid shift (class IV)		Vehicle - end of shift	
Tool inventory - end of shift		Vehicle safety gear Yes ☐ No ☐	

Log entries must include arrivals, departures, breaks, meals, security issues, contacts for counts, wellness checks, worker injuries, visitors on work sites, changes to assigned workers, movements, and significant events.

TIME	LOG ENTRY