**eXHIBIT 16-c Resident aND aSSISTANCE Engineer’s Daily report**

|  |  |
| --- | --- |
| Report No.  | Date:  Day: M T W T F S S   |
| Shift Hours   Start Stop  | Temperature:   MIN. MAX. |

Weather

(Print First/Last name) Signature Date

Distribution: Original local agency project file (field office)

**(Page 1 of 1 form)**

**Daily Inspection Report** Report No.

 Date and Shift Began:

 NightWork: [ ]  Yes [ ]  No

 Shift Hours: Start Stop

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Project Name  | Contract Number  | Federal Aid Number  | Temperature  | Weather/Precip  |
| Low | High |
|  |  |
| Hours By Item Number | Contractors Prime (P) Sub # 1 (1) Sub # 2 (2) Sub #3 (3) Sub # 4 (4) |
|  |  Item No. >> |  |  |  |  |  |  | Idle or Down  |
| Daily Quantity >> |  |  |  |  |  |  |
| Item Description |  |  |  |  |  |  |
| EquipmentNO. Description  |
| RT/OT | RT/OT | RT/OT | RT/OT | RT/OT | RT/OT | Y/N | Labor Name Classification  | Prime/ Sub  |
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Location and Description of Operation, Quality Assurance Actions Preformed, Meetings/Conversations and Quantities Placed Measured

(Print First/Last name) Signature Date

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Project Name  | Contract Number  | Federal Aid Number  | Temperature  | Weather/Precip |
| Low | High |
|  |  |
| Hours By Item Number | Contractors Prime (P) Sub # 1 (1) Sub # 2 (2) Sub #3 (3) Sub # 4 (4) |
|  |  Item No. >> |  |  |  |  |  |  | Idle or Down  |
| Daily Quantity >> |  |  |  |  |  |  |
| Item Description |  |  |  |  |  |  |
|  EquipmentNO. Description  |
| RT/OT | RT/OT | RT/OT | RT/OT | RT/OT | RT/OT | Y/N | Labor Name Classification | Prime/ Sub  |
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**Daily Inspection Report** **(Page 1 of 2 form)**

Report No.

Date the Shift Began

Nightwork: [ ]  Yes [ ]  No

Shift Hours: Start Stop

**(Page 2 of 2 form)**

Location and Description of Operation

Quality Assurance Actions Preformed

Meetings and Conversations

Quantities Placed Measured

Employee Interview Preformed Today [ ]  Yes [ ]  No

Certificate of Compliance Collected Today [ ]  Yes [ ]  No

Buy America Certificates Collected Today [ ]  Yes [ ]  No

 (Print First/Last name)

 Signature Date