**Project Name:**

**Project Number:**

**Line Item Number:**

**Pay Item Number:**

**Item Description:**

**Date Work Performed:**

---

### Daily Record of Inspection & Activities *

<table>
<thead>
<tr>
<th>Name of TCS</th>
<th>Day</th>
<th>Temperature</th>
<th>Name of Technician(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Weather**

- Clear
- Part. Cloudy
- Cloudy
- Rain
- Snow

**Wind Conditions**

- Calm
- Light
- Strong

**Location/Today’s Operations**:  

---

**Evidence Of An Accident**

- Yes
- No

**Appropriate Number Of Flaggers Being Utilized**

- Yes
- No

**Adequate Buffer Space**

- Yes
- No

**Flaggers Equipped With Proper PPE**

- Yes
- No

**Is the Work Area Protected**

- Yes
- No

**Flaggers Stationed Proper Distance From Hazards**

- Yes
- No

**Materials Properly Stored**

- Yes
- No

**Flagger Stations Highly Visible**

- Yes
- No

**Traffic Delays & Closures Meet Contract Specifications**

- Yes
- No

**Advanced Warning Signs Installed Per Contract & MUTCD**

- Yes
- No

**Number Used**  

**Number Stored**  

**All Correct**  

**Missing**  

**Damaged**  

**Adequate**  

**Inadequate**  

| Pilot Vehicle |  |  |  |  |  |  |
| Flaggers      |  |  |  |  |  |  |
| Construction Signs |  |  |  |  |  |  |
| Barricades    |  |  |  |  |  |  |
| Drums         |  |  |  |  |  |  |
| Vertical Panels |  |  |  |  |  |  |
| Tubular Traffic Markers |  |  |  |  |  |  |
| Pavement Markings |  |  |  |  |  |  |
| Arrow Board   |  |  |  |  |  |  |
| Variable Message Board Message |  |  |  |  |  |  |
| Temporary Concrete Barrier |  |  |  |  |  |  |
| Other         |  |  |  |  |  |  |

**Location (Station) Of Missing Or Damaged Devices**

**Maintenance Corrections Or Replacements**

**Date Last Cleaned:**  

- Cones
- Lights
- Signs
- Barricades

---

**Name of person measuring work:**

---

**Interim Measurement**  

**Final Measurement**

---

**Measured Quantity:**  

1 Day

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**FHWA Use Only**

**Verified By:**

**PE, Inspector, CPE, CI**

**Approved**

**Entering To Record**

**Checked By:**

**FHWA Representative**

**Date:**

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