

DAILY LOG - ROOF INSPECTION FORM

Name of Project: _____

Date: _____

Building Name or #: _____
=====

Roof Contractor: _____

Foreman: _____

of Crew on Job: _____

Work Schedule: Start Time _____ Finish Time _____

Weather Conditions: _____ Temp: ____ AM ____ PM

Condition of Deck: _____

Decking Replaced: _____ Square Feet: _____

Materials Storage/Condition: _____

Bitumen Temperatures:	Kettle:	Point of Application
Temperatures @ _____ AM	_____ °F	_____ °F
_____ AM	_____ °F	_____ °F
_____ PM	_____ °F	_____ °F
_____ PM	_____ °F	_____ °F

E.V.T. _____ °F

Job Status and Progress: _____

Special Notes: _____

INSPECTOR NAME (PRINT)

INSPECTOR'S SIGNATURE (DATE)

(12/96)

APPLICATION

WERE ALL DECK AND WALL SUBSTRATES PREPARED AS SPECIFIED? YES NO

OPERATION	COMPLIES	DEVIATES	NA TODAY	OPERATION	COMPLIES	DEVIATES	NA TODAY
Nailers				Flashing Stripping			
Deck Priming				Counter Flashing			
Wall Priming				Curb Flashing			
Base Felt				Edge Construction			
Vapor				Fascia Construction			
First Layer Insulation				Equipment Supports			
Attachment				Skylights			
Successive installation Layers				Expansion or Control Joints			
Attachment				Vent Stack Flashings			
Ply Felts				Drains & Drain Flashing			
Interply Moppings				Scuppers			
Base Flashing				Coating			
Flashing Nailing				Graveling			

DESCRIPTION OF DEVIATIONS NOTED ABOVE:

WAS THERE ANO PHASE PHASE CONSTRUCTIONS TODAY? YES NO

IF YES, EXPLAIN: _____

WHAT PRECAUTIONS/ CORRECTIVE ACTIONS WERE TAKEN: _____

WAS DEBRIS CLEANED UP TODAY? YES NO WATER CUTOFFS INSTALLED YES NO

IS MEMBRANE SEALED AT WALLS AND PROJECTIONS? YES NO

TOTAL ROOF AREA (Square)	Completed Today	V.R.	Membrane	Completed Previous	V.R.	Membrane	Total Completed	V.R.	Membrane
TOTAL FLASHING (Lin. Ft.)	Completed Today			Completed Previous			Total Completed		