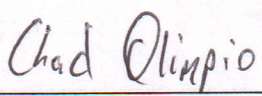


<b>Project# 233043</b>	<b>BLUE RIVER DAILY PRODUCTION REPORT</b> (ATTACH ADDITIONAL SHEETS IF NECESSARY)	DATE OF REPORT: 11/30/2023 REVISION NO: 0 REVISION DATE: N/A			
PROJECT NAME/LOCATION: Robertsdale Neighborhood - Hammond, Indiana		REPORT NO: 1			
PROJECT NO: 233043	SITE SUPERVISOR: Chad Olimpio	HEALTH & SAFETY OFFICER: Chad Olimpio			
<b><u>SUMMARY OF WORK PERFORMED TODAY</u></b>					
1306= Excavated/Removed contaminated soil from front and back yard. Back fill back yard finished. Excavated/Removed contaminated soil from alley apron. Backfilled with stone.- Yard done Water sod Misc clean-up of stock yard					
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; width: 80px; margin: 0 auto;"> <b>JOB SAFETY</b> </div>	Was A Job Safety Meeting Held This Date? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>TOTAL WORK HOURS ON JOB SITE THIS DATE (Including Continuation Sheets)</b>			
	Were there any lost-time accidents this date? (If yes, attach copy of completed OSHA report) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	BRER On-Site Hours <span style="float: right;">60</span>			
	Was a Confined Space Entry Permit Administered This Date? (If yes, attach copy of each permit) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Total Hours On-Site <span style="float: right;">60</span>			
	Was Crane/Manlift/Scaffold/HV Elec/High Work/Hazmat Work Done?? (If yes, attach statement or checklist showing inspection performed) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Cumulative Total of Work Hours from Previous Report <span style="float: right;">5113</span>			
	Was Hazardous Material/Waste Released into the Environment? (If yes, attach description of incident and proposed action) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Total Work Hours from Start of Construction <span style="float: right;">5113</span>			
<b><u>SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED</u></b> (Include Safety Violations, Corrective Instructions Given, Corrective Actions Taken, and Results of Safety Inspections Conducted):  N/A					
<b>EQUIPMENT USED ON JOB SITE TODAY.</b>					
EQUIPMENT DESCRIPTION	EQUIPMENT MAKE/MODEL	SAFETY CHECK PERFORMED BY	NUMBER OF HOURS		
			USED	IDLE	Repair
300.3 Mini Excavator	CAT	Mike Bukur	8	0	
303 Mini Excavator	CAT	Mike Bukur	8	0	
TB 235 Mini Excavator	Takeuchi	Adalberto Carrasquillo	8	0	
Walk Behind Skid Steer	Vermeer S450ix	Mike Bukur	8	0	
Walk Behind Skid Steer	Vermeer s450ix		8	0	
Water Buffalo	Wylie		4	4	
259 Skid Steer	CAT	Mike Bukur	8	0	
Dump Truck	United Rental 11202541		8	0	
Dump Truck	United Rental 11202525	Logan Brewer	8	0	
259D3 Skid Steer	CAT	Adalberto Carrasquillo	8	0	
Articulated Front End Loader 926M	CAT	Darren Dedelow	4	4	
<b>CHANGED CONDITIONS/DELAY/CONFLICTS ENCOUNTERED</b> (List any conflicts with the delivery order [i.e., scope of work and/or drawings], delays to the project attributable to site and weather conditions, etc.)  None					
SAFETY REQUIREMENTS HAVE BEEN MET <input checked="" type="checkbox"/>			<div style="display: inline-block; text-align: left;">             Signature         </div>		<div style="display: inline-block; text-align: left;">             Date         </div>



Project # 233043	<b>BLUE RIVER DAILY PRODUCTION REPORT</b>				DATE OF REPORT: 11/30/2023
	(ATTACH ADDITIONAL SHEETS IF NECESSARY)				REVISION NO: 0 REVISION DATE: N/A
PROJECT NAME/LOCATION: Robertsdale Neighborhood - Hammond, Indiana					REPORT NO: 1
<b>WORK PERFORMED TODAY</b>					
EMPLOYEE	WORK PERFORMED	EMPLOYER	EMPLOYEE NUMBER	TITLE/TRADE	HRS
Ryan Perry	Dump trailer driver			Site Supervisor	0
Josh Terry	Laborer			Laborer	10
Mike Bukur	Equipment operator			Operator	0
Logan Brewer	Laborer			Laborer	0
Adalberto Carrasquillo	Equipment Operator			Operator	10
Jeff Holcomb	Laborer			Laborer	10
Darren Dedelow	Equipment Operator			Operator	10
Bryan Perry	Laborer			Laborer	0
Chad Olimpio	Site Supervisor/Health & Safety Officer			Project manager	10
Saul Cordero	Laborer			Laborer	10

INCLUDE ALL PERSONNEL WORK HOURS IN THE TOTAL WORK HOURS ON JOB SITE	
SAFETY REQUIREMENTS HAVE BEEN MET <input checked="" type="checkbox"/>	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;">             _____            SUPERINTENDENT'S SIGNATURE         </div> <div style="text-align: center;">           12/1/23            _____            DATE         </div> </div>