

Plumber Work Report



Reporting Month and Year

Construction Industry Training Council of Colorado, Inc.

Name: _____ Address: _____ Employer: _____

Phone: _____ City, State, Zip Code: _____ Supervisor/Journeyman's rating on progress:

Excellent
Good
Fair



- Incorrect/incomplete work reports will not be processed.
- Check your math!
- Reports turned in after the 5th are LATE.

PRINT Supervisor's Name: _____

Supervisor's Phone: _____

Supervisor's Signature: _____

HOURS THIS MONTH	Last Month's HOURS CARRIED FORWARD	New Hours Carried Forward	Hours needed to complete
↓	↓	↓	↓
			900
			450
			250
			500
			125
			2200
			500
			1450
			500
			625
			250
			250
			8000

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Tools, Equipment & Materials - Care & Use, Preparation																															
Safety - Vehicle, Jobsite Conditions, Electrical, Power Tools, Personal Protective Gear, Lifting, Scaffolding & Ladders																															
Storm Piping																															
Piping - Cutting, Reaming, Threading and Flanging, Power & Industrial Process																															
Drawings																															
Waste and Venting																															
Setting Equipment - Install Water Heaters, Boilers, Pumps, Compression & Expansion Tanks, Storage Tanks, Air Separators																															
Piping, Hot/Cold Water Systems for Domestic Purposes																															
Gas System Appliances																															
Single Fixture Install - Commodes, Bathtubs, etc.																															
Rigging																															
Welding/Cutting																															
TOTALS																															