



STATE OF FIELD OBSERVATIONS

ASPD PROJECT#:				DATE:			
PROJECT NAME:							
Address:							
OWNER ENTITY:							
Address:				Phone:			
				Email:			
CONTRACTOR COMPANY:							
Address:				Phone:			
				Email:			
ARCHITECTURAL/ENGINEERING FIRM:							
Address:				Phone:			
				Email:			
PROJECT DATA ON THE DATE OF OBSERVATION							
#OF WORKERS:				SITE CONDITIONS:			
WEATHER:				START DATE:		COMPLETION DATE:	
SCHEDULED STATE OF COMPLETION:				%		ESTIMATED ACTUAL COMPLETION:	
CONTRACTOR'S SUPERINTENDENT:						JOB PHONE:	
COMMENTS/DEFICIENCIES:							
SIGNATURE:						REPORT#:	
CC: Owner, Architect/Engineer, Contractor							