**Project Inspector (PI) Daily Report**

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| **Owner:** | Los Angeles Community College District |  | **Date:** |       |  |
| **Site/Campus:** |  |  | **Report No.:** |       |  |
| **Project Name:** |       |  | **PI Firm:** |       |
| **DSA APP No:** |       |  | **PI Name:** |       |
| **CPT PM:** |       |  | **PI Hours:** |       |
| **AOR:** |       |  |  |  |  |  |
| **General Contractor:** |       |  | **Weather:** |       |
|  |  |  |  |  |
| **Work Performed:** | [Describe work performed by the contractor on the date of the report] |

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| **Workforce:** | Superintendent |       |  | HVAC |       |  | Roofers |       |
|  | Carpenters |       |  | Iron Workers |       |  | Soils Workers |       |
|  | Concrete Workers |       |  | Laborers |       |  | Structural Workers |       |
|  | Dry Wall Workers |       |  | Masons |       |  | Suspended Ceiling Worker |       |
|  | Electricians |       |  | Operating Eng |       |  | Tile Setter |       |
|  | Flooring |       |  | Painters |       |  |       |       |
|  | Glazers |       |  | Pipe Fitters |       |  |       |       |
|  | Hardware |       |  | Plumbers |       |  |       |       |
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|  | **NOTE: Personnel entries are given to the PI by the GC’s superintendent.** | **Total:** | 0 |

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| **Daily Inspections****Performed:** | Description | Result |
| [List the official inspection performed by the inspector. Identify the pass/fail result of the item inspected.] |  |
| *(See attached pictures – Optional)* |       |  |
|       |  |
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| **Additional Inspections Performed** **Per Request:** | Description | # of Hours Performed | Result |
| [List the official inspection requested by the contractor. If unable to perform the inspection, enter "X" for the Result and provide reason.] |       |  |
|       |       |  |
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| **Reinspections Performed** **Per Request:** | Original/Failed Inspection Date | Description | # of Hours Performed | Result |
|       |       |       |  |
|  |       |       |       |  |
|  |       |       |       |  |
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| **Notices of Nonconformance:** | [List any Items of Concern, Correction Notices, Deviation Notices, and/or DSA FTNs] |
|  |  |
| **Special Inspectors:** | Concrete |       |  | SS Welding |       |  |       |       |
| Masonry |       |  |       |       |  |       |       |
|  |  |
| **Laboratory of Record:** | [Insert LOR name, as well as a description and location of the Specialty Inspectors work performed] |
|  |  |
| **Incidents /****Unusual Events:** | Description of Incident/Unusual Event | Reported to: | Reported via: |
| [Identify any Incident/Unusual Event that occurred on the project during construction working hours, and verify that such incidents are reported to the appropriate personnel accordingly] |       |       |
|       |       |       |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |
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| **Equipment Used:** |       |
|  |  |
| **Site Visitors:** |       |

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| **Inspected By:** |  |  |       |  |       |
|  | **PROJECT INSPECTOR** (PLEASE SIGN) |  | **PRINT NAME** |  | **DATE** |
| **Reviewed By:** |  |  |       |  |       |
|  | **CPT PROJECT MANAGER** (PLEASE SIGN) |  | **PRINT NAME** |  | **DATE** |

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| **Picture 1** *(Maximum image size limit: 500KB)* |
| N/A |
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|  |
| **Picture 2** *(Maximum image size limit: 500KB)* |
| N/A |