**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 |  |  |  | |  |
|  |  |  |  |  |  |  |  | |  |
|  | **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:** |  | | | | | | | | | |
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| **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 |