

SNOW CLEARING DAILY MAINTENANCE SCHEDULE							
SITE: _____ CONTRACT NO.: EP305-15-0891 WEEK OF: _____							
This is to verify that the following areas are clear (c) fallen or drifting snow and ice, and/or have been salted (s) or sanded (sn) - including the use of chip stone as per Section 2 of this contract.							
LOCATION	SUN.	MON.	TUES.	WED.	THURS.	FRI.	SAT.
Note timeframe work completed - including ice control measures.							
Sidewalks & Handicap Ramps							
Roadways, ramps & gates							
Parking Lots							
Fire Routes, hydrants, standpipes							
Doorways and emergency exits to buildings, sea containers and portables.							
A. C. Units or other mechanical areas							
Culverts, drains, downspouts							
Loading Docks							
Fuel Filler Pipes & Pumps							
Roof ladders							
Refuse Bins							
Litter Picked Up							
Remarks:							
Supervisor's Initials							
Time Supervision Completed							

DATE:

NAME OF SUPERVISOR:

CONTRACTOR'S SIGNATURE:

LANDSCAPE DAILY MAINTENANCE SCHEDULE							
SITE: _____ CONTRACT NO.: EP305-15-0891 WEEK OF: _____							
This is to verify that the following operations have been performed as per specifications. Please indicate time work completed.							
TASK LIST	SUN.	MON.	TUES.	WED.	THURS.	FRI.	SAT.
Raking							
Garbage Pickup							
Sweeping Parking Lots & Roads							
Sweeping Walkways							
Clearing Catch basins							
Cultivating Beds							
Mulching							
Pruning Trees & Shrubs							
Weeding Beds							
Trimming							
Watering							
Mowing Turf							
Pest Control							
Remarks:							
Supervisor's Initials							
Time Supervision Completed							

DATE:

NAME OF SUPERVISOR:

CONTRACTOR'S SIGNATURE:
