DELAWARE COUNTY ENGINEER
50 CHANNING STREET
DELAWARE, OH 43015

FORCE ACCOUNT/EXTRA WORK LOG SHEET

Project: _____

Location: _____

Date Work Performed: _____

Work Description in Detail:

_____

_____

_____

_____

_____

_____

LABOR			
Date	**Name**	**Classification**	**Hours**

EQUIPMENT			
Number	**Type**	**Rented/Owned**	**Hours**

MATERIAL			
Quantity	**Units**	**Description**	**Source**

Signatures:

Site Foreman _____ **Date** _____

Company _____

DCEO Rep: _____ **Date** _____