

Christopher-Kohl's Fire District Fuels Reduction Project

Labor and Equipment Record

2007 - 2008

Dept., Organization, or HOA						PRIVATE - COMMON - COMMERCIAL					
Name of Person or Supervisor and Number of Persons Working (#-)						Telephone #		E-Mail Address			
Address / 911 Address						Has Lot Been Assessed? Yes No Size in Acres _____					
Date	Hours	Last Name	Description of Service	Type of Equip. Used	Size	Day	Truck Type	Day	Miles	Trailer Type	Size
<i>00/00</i>	<i>0</i>		<i>Rake, Trim, Cut&Haul Etc.</i>	<i>Chain Saw, Weed Whacker, Etc.</i>			<i>P-U</i>			<i>Utility</i>	<i>1/2 T</i>
Totals											

This Document Certifies that the information provided herein is true and correct and that the above named employee or volunteer devoted the time or equipment used as indicated.

Employee / Volunteer Signature _____

Date _____

Please Write Any Comments On The Back Of This Sheet.

PLEASE TURN IN TIME SHEETS TO STATION #51 CKFD BY THE 25th OF THE MONTH