



FACILITIES DIVISION

ACCS FORM 6-C

STATEMENT OF FIELD OBSERVATIONS

ACCS PROJECT#:		DATE:	
PROJECT NAME:			
Address:			
OWNER ENTITY:			
Address:		Phone:	
		Email:	
CONTRACTOR COMPANY:			
Address:		Phone:	
		Email:	
ARCHITECTURAL/ENGINEERING FIRM:			
Address:		Phone:	
		Email:	
PROJECT DATA ON THE DATE OF OBSERVATION			
#OF WORKERS:		START DATE:	
WEATHER:			
SITE CONDITIONS:			
CONTRACT COMPLETION DATE:		CONTRACTOR COMPLETION DATE:	
SCHEDULED STATE OF COMPLETION:	%	ESTIMATED ACTUAL COMPLETION:	%
CONTRACTOR'S SUPERINTENDENT:		JOB PHONE:	
COMMENTS/DEFICIENCIES:			
SIGNATURE:		REPORT#:	
CC: Owner, Architect/Engineer, Contractor			