

## PRE-JOB CONFERENCE REPORT FORM:

NAME OF AGREEMENT: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

OWNER: \_\_\_\_\_

LIUNA INTERNATIONAL REPRESENTATIVE: \_\_\_\_\_

LOCAL UNION REP: \_\_\_\_\_ STEWARD: \_\_\_\_\_

CONTRACTOR REPRESENTATIVE: \_\_\_\_\_

SUPERINTENDENT: \_\_\_\_\_

JOB LOCATION: \_\_\_\_\_ PHONE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ COMPLETION DATE: \_\_\_\_\_

HOURS OF WORK: \_\_\_\_\_ DAYS PER WEEK: \_\_\_\_\_

NUMBER OF LABORERS: \_\_\_\_\_ FRINGE RATE: \_\_\_\_\_

LOCAL UNION: \_\_\_\_\_

SUBCONTRACTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

TYPE OF WORK SUBBED: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

### KEY EMPLOYEES

NAME

SS#

JOB CLASSIFICATION

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____