

Using Adobe to fill out DSFR Forms

Example of DSFR



6713 Netherlands Drive
Wilmington, NC 28405
Phone: 910.452.7900
Fax: 910.452.7913

DAILY STATUS FIELD REPORT	
Project Name: Embassy Suites	Project Number: 16.015
Date: Monday August 21, 2024	
Weather Conditions: Sunny/Clear/Breezy	
Temperature: A.M.: 70	P.M.: 80
Loss Time: Hours	Employees

<input type="checkbox"/> Plumbing 1500	<input type="checkbox"/> Piping 1600	<input checked="" type="checkbox"/> HVAC 1700
<input type="checkbox"/> Service 1800	<input type="checkbox"/> Electrical 1900	

Increment weather comments:
= Total Loss Manpower Hours

First Section

Work Performed Today: 1flr: Installed unit heaters in boiler room
2flr: Tie to breakfast buffet hood.
4-5flr: Fire caulked duct pen from corridor

Work Performed by GC Today: Supervised

Note All Concrete Pours: None

Second Section

For the above referenced project number, T. A. Woods Company is serving as the: GC/Controlling Subcontractor

Contractors: (Other than T.A. Woods)			T.A. Woods		
Man Power:	Name of Contractor:	Hrs:	Man Power:	Hrs:	
<input checked="" type="checkbox"/> GC/CM	WM Jordan		Plumbing Company Equipment:		
<input type="checkbox"/> Electrical	Griffin Elec		6	Piping 40	
<input checked="" type="checkbox"/> Fire Protection	Odyssey		6	Sheet Metal 40	Rental Equipment:
<input checked="" type="checkbox"/> HVAC	TAW		Electrical		
<input type="checkbox"/> Plumbing	Eamheart		Start-Up Inspections Today:		
<input type="checkbox"/> Insulation			QC/SSHO Hours:		
<input checked="" type="checkbox"/> Partitions	Precision Walls		QC Manager Tool Transfers:		
<input checked="" type="checkbox"/> Other	Concrete Sub		SSHO		
TOTAL MANPOWER ON SITE:		10	TOTAL LABOR HOURS ON SITE:		80

Third Section

Conversation Confirmer Regarding Project: N/A

Delays/Problems/Field Directives: Waiting on Prec Walls to fix fire damper, louver, and duct open on ground 2-7 flrs

General Comments: Prec Walls still installs sheetrock around closet WSHP's making tie difficult/impossible. Happening on every floor with tie.

Last Section

Daily 5x3's:

- Heat Stress
- Hydration
- Heat Stress First Aid

Reported Accident/ Injury: Yes No Incident Report / ART Completed: Yes No N/A

By providing my signature, I am validating that the information provided is true and correct to the best of my knowledge.

Superintendent's Signature: Sign name here

Date: 8/21/2024

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First Section

AAA WOODS
6713 Netherlands Drive
Wilmington, NC 28403
Phone: 910.452.7100
Fax: 910.452.7101

DAILY STATUS FIELD REPORT

Project Name: _____ Project Number: _____

Date: _____

Plumbing 1500 Piping 1600 HVAC 1700
 Service 1800 Electrical 1900

Weather Conditions: _____
Temperature: _____ A.M. : _____ P.M. : _____
Loss Time: _____ Hours _____ Employees _____
Inclement weather comments: _____
Total Loss Manpower Hours: _____

1. Enter in the Project number

2. Tap which one applies to you

3. Enter Date

4. Temperature

5. Tap on down arrow to choose the weather

If you had any Loss time, that is when you fill in the blue squares that state "Loss Time, Hours, Employees, weather comments"

Second Section

6. Enter work performed **SHORT AND BRIEF**

Work Performed Today: _____

Work Performed by GC Today: _____

Note All Concrete Pours: _____

For the above referenced project number, T. A. Woods Company is serving as the: GC/Controlling Subcontractor

7. Enter what General Contractor did **SHORT AND BRIEF**

8. If Subcontractor poured concrete; enter specific area and description of pour

9. Tap the appropriate one

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Third Section

10. Tap Contractors (Other than TAW)

11. Enter Company name

12. Enter # of employees (TA WOODS)

13. Enter information that is necessary

List All On-Site Today:
Contractors: (Other than TAW Woods)

Man Power:	Name of Contractor:	Hrs:	Man Power:	Hrs:
<input type="checkbox"/> GC/CM			Plumbing	
<input type="checkbox"/> Electrical			Piping	
<input type="checkbox"/> Fire Protection			Sheet Metal	
<input type="checkbox"/> HVAC			Electrical	
<input type="checkbox"/> Plumbing			Start-Up	
<input type="checkbox"/> Insulation			QC/SSHO Hours:	
<input type="checkbox"/> Partitions			QC Manager	
<input type="checkbox"/> Other			SSHO	
TOTAL MANPOWER ON SITE:			TOTAL LABOR HOURS ON SITE:	

14. Enter Manpower on site

15. Enter Hours

Company Equipment:
Rental Equipment:
Inspections Today:
Tool Transfers:

Last Section

16. Enter delays, Problems, & field directives

17. Enter relevant comments

18. Document your 5X3 from today

20. Answer the whole grey row by tapping on the Yes/No/N/A Boxes

21. Superintendent/Foreman Sign and Date
(See Adobe Manual on how to create a signature P.6)

Conversation Confirmer Regarding Project:
Delays/Problems/Field Directives:

General Comments:

Daily 5x3's:

-
-
-

Reported Accident/ Injury: Yes No Incident Report / ART Completed: Yes No N/A

By providing my signature, I am validating that the information provided is true and correct to the best of my knowledge.

Superintendent's Signature: _____ Date: _____