

Daily Schedule Form

Date _____

Job _____

1. Tasks I want to accomplish tomorrow.

_____	_____
_____	_____
_____	_____
_____	_____

2. Tasks I want to start in three days.

_____	_____
_____	_____
_____	_____

3. Tasks I want to start in a week.

_____	_____
_____	_____
_____	_____

4. Subcontractors or inspections to Schedule

- | | |
|--|--|
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Electrician |
| <input type="checkbox"/> Excavator | <input type="checkbox"/> Plumber |
| <input type="checkbox"/> Foundation work | <input type="checkbox"/> HVAC |
| <input type="checkbox"/> Structural Steel Fabricator | <input type="checkbox"/> Specialty Systems: Home theatre, audio, etc |
| <input type="checkbox"/> Mason | <input type="checkbox"/> Insulation |
| <input type="checkbox"/> Plumber | <input type="checkbox"/> Drywall Finisher |
| <input type="checkbox"/> Concrete Finisher | <input type="checkbox"/> Tile and Marble |
| <input type="checkbox"/> Framing Contractor | <input type="checkbox"/> Interior trim Carpenter |
| <input type="checkbox"/> Exterior Window and Door supplier | <input type="checkbox"/> Flooring installers |
| <input type="checkbox"/> Roofing | <input type="checkbox"/> Cabinet Suppliers |
| <input type="checkbox"/> Siding | <input type="checkbox"/> Countertop supplier |
| | <input type="checkbox"/> Painting |
| | <input type="checkbox"/> Appliance Supplier |

5. Materials to order

- | | |
|------------------|--------------|
| a. Framing | e. Siding |
| b. Exterior trim | f. Nails |
| c. Doors | g. Fasteners |
| d. Interior trim | |

6. Company Personnel Needed Next week

Mon _____ Tues _____ Wed _____ Thur _____ Fri _____

7. Client Decisions _____