

TOWN
FEDERAL PROJECT NO.
STATE PROJECT NO.
DATES

FORM NO. CON-40 REV. 4/2015

STATE OF CONNECTICUT
DEPARTMENT OF TRANSPORTATION
DAILY LABOR AND WORK RECORD
PUBLIC UTILITY

UTILITY	
UTILITY W.O.	% COMPLETE
UTILITY SUB-CONTRACTOR	

LABOR EMPLOYED				EQUIPMENT USED			MATERIALS AND SUPPLIES USED			REMARKS
DATES	CLASSIFICATION	NO.	Total Hours	KIND (SIZE OF CAPACITY)	NO.	Total Hours	ITEM	QTY	UNIT	DESCRIPTION AND LOCATION

I CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF, THAT THE ACCOUNT HEREIN SHOWN IS AN ACCURATE STATEMENT OF THE LABOR AND EQUIPMENT EMPLOYED AND THE MATERIALS USED IN THE CONSTRUCTION WORK IDENTIFIED BY THE HEADING ON THIS SHEET.

SIGNED: _____ FOR UTILITY _____ TITLE _____ DATE _____ FOR DEPT. OF TRANSPORTATION _____ TITLE _____ DATE