

BUILDINGWRENCH

CONTRACTOR SITE CHECK-IN / CHECK-OUT

A general site coordination record - not a substitute for permits, licensing or safety programs.

CHECK-IN				
Company	Technician(s)	Date	Arrival	Work area
_____	_____	_____	_____	_____
Scope / WO / PO	Site contact	Required access coordinated	Known site restrictions	Expected completion
_____	_____	_____	_____	_____

CHECK-OUT				
Departure	Work completed?	Area left safe / clean?	Systems returned to service?	Follow-up needed?
_____	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N ☐ N/A	☐ Y ☐ N
Service report received	Photos / readings received	Keys / badges returned	Open deficiencies	Facility sign-off
☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N ☐ N/A	_____	_____

Use site-specific contractor safety, permit, lockout/tagout, hot-work, confined-space and other required programs when applicable.

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