

| EMERGENCY EQUIPMENT SHIFT TICKET | | | | | |
|---|-------------------|--|------------------------------------|--|--|
| <i>NOTE; The responsible Government Officer will update this form each day or shift and make initial and final equipment inspections.</i> | | | | | |
| 1. AGREEMENT NUMBER | | | 2. CONTRACTOR (name) | | |
| 3. INCIDENT OR PROJECT NAME Ten Mile | | 4. INCIDENT NUMBER ID-PAF-005567 | | 5. OPERATOR (name) | |
| 6. EQUIPMENT MAKE | | 7. EQUIPMENT MODEL | | 8. OPERATOR FURNISHED BY <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> GOVERNMENT | |
| 9. SERIAL NUMBER | | 10. LICENSE NUMBER | | 11. OPERATING SUPPLIES FURNISHED BY <input type="checkbox"/> CONTRACTOR (wet) <input type="checkbox"/> GOVERNMENT (dry) | |
| 12. DATE MO/DAY/YR | 13. EQUIPMENT USE | | | | 14. REMARKS (released, down time and cause, problems, etc.) |
| | START | STOP | HOURS/DAYS/MILES(circle one) | | |
| | | | WORK | SPECIAL | |
| | | | | | |
| | | | | | 15. EQUIPMENT STATUS <input type="checkbox"/> a. Inspected and under agreement <input type="checkbox"/> b. Released by Government <input type="checkbox"/> c. Withdrawn by Contractor |
| | | | | | 16. INVOICE POSTED BY (Recorder's initials) |
| 17. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE | | | 18. GOVERNMENT OFFICER'S SIGNATURE | | 19. DATE SIGNED |