



JOBSITE LIFT REQUEST

Person Requesting: _____

Type of Lift Required (be Specific): _____

Job Number: _____

Today's Date: _____

Lift Start Date: _____

Lift End Date: _____

Is the lift required for the job? YES NO

Is the lift specified in the contract? YES NO

If not, who gave approval for this lift? _____

Are we billing the customer for the Lift? YES NO

How much are we allowed to bill based on the contract? \$ _____

How long is the lift allowed according to the contract? _____

Jobsite Contact:

Name: _____

Phone #: _____

PO# _____

You will be responsible for calling the lift off on the end date, please set any reminders that you need to make sure this happens on the day indicated above.