



THE CRANE GANG LTD.

TIME SHEET

Date: _____ DAY / MONTH / YEAR

First Name: _____ Last Name: _____

Contactors Name: _____

Job Title: _____

Site Address: _____

Fill out all times in 24-hour system. Add the hours worked at the end of each day and total your working hours for the week in the box below. **8 hours minimum hire applies.**

Day	Start (24hr)	Finish (24hr)	Breaks	Maintenance	Travel	Total Hours
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
Total Hours Worked:						

Site Agent Name _____
Block Capitals _____

Site Agent Signature _____

Date of signing: _____ DAY / MONTH / YEAR

Submit time sheet to
Email: info@thecranegang.ie - (photo / scan)