SNOW/ICE REMOVAL LOG

LOCATION:_____   **WINTER SEASON: 200 /200**

PLACE **X** OR ╱ IN APPROPRIATE COLUMNS:

DATE	TIME	NAME OF PERSON(S)	PARKING LOT(S)	SIDE-WALK(S)	SNOW REMOVED	SALTED/SANDED

RM:10/01   Please retain log for at least 3 years after winter season.