

# EXCAVATING AND DITCHING

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Job Location \_\_\_\_\_

|                 |  |
|-----------------|--|
| MACHINE         |  |
| OPERATOR        |  |
| TIME STARTED    |  |
| TIME STOPPED    |  |
| HOURS WORKED    |  |
| PREM. TIME-OP.  |  |
| EXTRA EQUIPMENT |  |
| MOVING CHARGE   |  |

## **TERMS OF WORK AGREEMENT**

Minimum charge 4 hours

Moving charge on all equipment

Signed By \_\_\_\_\_