



County: _____

Officer: _____

Last 4 SSN: _____

Badge #: _____

Vehicle License #: _____

Department/Agency: _____

Date: _____

Start Time: _____

End Time: _____

Total Hours: _____

Contractor: _____

Project #: _____

Location: _____

WORK BEING PERFORMED/REMARKS:

REASON FOR CANCELLATION:

CANCELLATION TIME (if applicable)

NAME OF PERSON WHO CANCELLED

Law Enforcement Officer's Signature

Contractor Name and Title

Contractor signature

This form is used to monitor and report traffic control officer's time and equipment. The contractor must obtain the officer's signature and provide TAAP the final report. Contractor invoice must be based on this form.