

JOB PROGRESS CHART

Name:	Home Phone:		Date Signed:
Address:	Business #1:	Business #2:	Permit #:
	Cell #1:	Cell #2:	
City/State/Zip:	E-mail #1:	E-mail #2:	

	Items	Supplier	PO No and Date Ordered	Due Schedule	Received Measured	Delivered Installed	Notes
1	Cabinets						
2	Countertop #1						
	A. Counter						
	B. Backsplash						
3	Countertop #2						
	A. Counter						
	B. Backsplash						
4	Flooring #1						
5	Flooring #2						
6	Decorating						
	A. Material						
	B. Painter						
	C. Paperhanger						
	D. Other						
7	Lighting						
8	Equipment						
9	Plumbing						
10	Electrical				Rough-in Insp.	Finish Insp.	
11	Construction Alteration				Job Insp.	Tear-out	Construction Insp.
					Patch	Set	Trim
12	Inspection						
13	Trash						
14	Extras						