

Snow Removal Log



Loss Prevention Program
By Red River Mutual

Property Name: _____

Property Manager: _____

For the Month of: _____

| Snow Removal Information | | | | | | | | |
|--------------------------|-------|--------|---|--------|-----------------------|------------------------|-------------------|----------|
| Date | Time | | Weather Conditions Prior to & During Snow Removal | | Snow Removal Location | Type of Work Performed | Work Completed By | Comments |
| | Start | Finish | Prior | During | | | | |
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Log Approval

Submitted By: _____

Date: _____

Approved By: _____

Date: _____