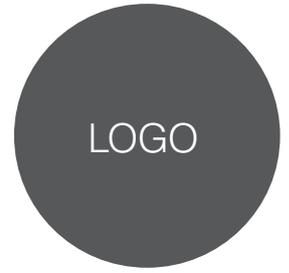


SCAFFOLDING – SITE INSTRUCTION



NO: _____
DATE: _____
JOB/SITE: _____

DESCRIPTION OF WORKS

HOURS: _____
SITE MANAGER: _____ FOREMAN/SUPERIOR: _____