Project Information

Nozzleman-In-Training: _____

Project Name: _____

Project Location: _____

Type of Work (check one):

- ☐ Repair
- ☐ New Construction

Thickness of sections shot: _____ (range in inches)

Process Used (check one):

- ☐ Wet-Mix Shotcrete
- ☐ Dry Mix Shotcrete

Equipment Used

Wet Mix Pump/ Dry Mix Gun: _____

Material Hose Diameter: _____ inches

Type of Nozzle Used: _____

Capacity of Air Compressor: _____CFM

Name of Supervisor: _____

Employer

Company: _____

Contact Person: _____

Contact Phone: _____--_____--_____

Contact Email: _____

This form *must* be accompanied by the "Nozzleman-In-Training Project Shooting Log" documenting hours of shooting. Print as many logs as required per project.

Nozzleman-In-Training Project Shooting Log

Please Use a New Log for Each New Project

Project: _____

Nozzleman: _____

Date(s) Max of 1 Week of Shooting Per Line	**Hours on Nozzle**	**Orientation** Vertically (V) or Overhead (O)	**Quantity Shot** Cubic Yards (CY) or Square Feet (SF)	**Notes**