

## TASK PLANNING

House Captain \_\_\_\_\_ Phone \_\_\_\_\_

Project # or Address \_\_\_\_\_

TASK # \_\_\_\_\_ (from HC's Outline of Work form) Type of task: \_\_\_\_\_

Material Description/Tools Needed		Quantity	Proposed Supplier	Cost
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
<b>Total Estimated Material Cost</b>				

List person(s) who are responsible for the shut off of the electric/water/gas in regard to this task.

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