Verification of Aerial Trimming Hours Around Powerlines

Date	Location & #	Hours Worked	PVMA Cert #	Name of UTT	Signature of UTT Or Equivalence	Utility Involved

Name of Employee _____ Full signature of Certified UTT or Equivalence is MANDATORY for **each** entry.

PVMA Utility Tree Trimmer/Utility Tree Worker
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Verification of Ground Work Hours Around Powerlines
(Non Aerial Tree Work)

Date	Location & #	Hours Worked	PVMA Cert #	Name of UTT	Signature of UTT Or Equivalence	Utility Involved

Name of Employee _____ Full signature of Certified UTT or Equivalence is MANDATORY for **each** entry.

PVMA Utility Tree Trimmer/Utility Tree Worker
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