



TIME SHEET

Please complete this Timesheet in full & send to: management@siteritesolutions.co.uk
 Please ensure that all alterations are counter signed and note that if there are queries or any sections then payment may be delayed. Please make sure that the week ending date and the Client name are accurately and clearly printed.

All Hours worked will be defaulted to Supervision Direction and Control (SDC), unless Non-SDC hours are stated below.

If Non-SDC Please Tick

Client:
 Site Address:
 Week ending:

Time sheets received after 12.00 noon Monday may not be included in the payroll that week.

NAME	Trade	Site	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Hours Paid		
										Standard	O/T 1	O/T 2

I confirm and agree that the total hours listed above, including overtime hours have been satisfactorily worked and that payment in respect of these will be made according to your current terms of business which I have received from you and accept as the basis of this transaction.

Name:

Date:

Signature: