

WAP Field Visit Form

Monitor: _____ Date of Visit: _____

Agency Visited: _____

Visit Type(s):
(Site Visit, File Review, Fiscal Review
etc)

File Review Type(s) (check if applicable)

| | | | | | |
|----------------|--|---------------|--|--------------|--|
| Program Files: | | Fiscal Files: | | Davis Bacon: | |
|----------------|--|---------------|--|--------------|--|

Number of Files Reviewed:

Inspection Type(s) (check if applicable)

| | | | | | |
|--------------|--|--------|--|-----------|--|
| In-Progress: | | Final: | | TA Visit: | |
|--------------|--|--------|--|-----------|--|

Number of Sites Visited:

Comments:

Monitor's Signature

Date