Step 3: On Site Observation

Name of Observer: _____

Date: _____ Outside Temperature: _____

Time of Day: Start: _____ End: _____

Location: _____

Weather: _____

Vehicle Description	Personal or County Vehicle	Idling Time in Minutes			Diesel or Gas Engine
		Start Time	End Time	Total Minutes	
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G
	P / C				D / G