***Note 1***: This spec should only be used for forms, labels, or business documents and is only for output documentation.

***Note 2:*** ADOBE interactive should refer to Interface Specification documents.

|  |  |
| --- | --- |
| 1000039: | The Tile Shop |
| RICEF/Issue Number |  |
| 1000040: |  |
| Specification Name: |  |
| Brief Description: |  |
| Related RICEF(s): |  |
| Created By: |  |
| Document Date: |  |
| Target Completion Date: |  |
| Priority Level (Low, Medium, High): |  |
| Document Type: | Form |
| Document Status: | New |
| Reusable Object(Yes/No): |  |

Contact Information:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Name** | **Company / Role** | **Email** | **Phone #** |
| **Client Owner**  **(BPO)** |  | BPO |  |  |
| **Functional Owner (Consultant)** |  | Function Lead | @itelligencegroup.com |  |
| **Technical Owner (Consultant)** | Joe Simmons | TPM | joe.simmons@itelligencegroup.com |  |
| **Developer** |  | Developer | @itelligencegroup.com |  |

Change History:

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Revised By** | **Section Changed** | **Description of Change** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Functional/Technical Estimate Information:

(Represents the functional/technical effort for analysis, development and unit testing)

|  |  |  |
| --- | --- | --- |
|  | **Functional Effort** | **Technical Effort** |
| **Estimate hours** |  |  |
| **Actual hours** |  |  |

## **Instructions:**

## **1000034:**

## [**Section 1**](#_To_be_completed) **Voice of the 1000039 (VOC) – All fields in light blue are required for the high-level specification. This section is completed by the Client Owner (BPO).**

## [**Section 2**](#_To_be_completed_6) **Response of the Consultant (ROC) – All fields in black are required for the RICEF justification. This section is completed by the Functional Owner (Consultant).**

## **☑ Sections 1 & 2 comprise the High Level Functional Spec.**

## **They are required prior to leaving the CRP/Blueprint phase.**

## **SOLUTION PERSONALIZATION/REALIZATION PHASE:Ow**

## [**Section 3**](#_To_be_completed_1) **Functional Design – All fields in dark blue are required for a complete functional specification. This section is completed by the Functional Owner (Consultant).**

## **☑ Functional Design Sign-off Required.**

## [**Section 4**](#_To_be_completed_2) **1000035 – All fields in orange are required for a complete technical specification. This section is completed by the Technical Owner (Tech Lead located onsite unless specified).**

## **☑ 1000035 Sign-off Required.**

## [**Section 5**](#_To_be_completed_3) **Technical Documentation – All fields in red are required for complete technical documentation, including documented unit test results. This section is completed by the Developer.**

## [**Section 6**](#_To_be_completed_4) **Functional Testing Results – All fields in purple are required for complete documentation of functional testing. This section is completed by the Functional Owner (Consultant).**

## [**Section 7**](#_To_be_completed_5) **User Acceptance Testing Results – All fields in green are required for complete documentation of user acceptance testing. This section is completed by the Client Owner (BPO).**

## **☑ User Acceptance Testing Sign-off Required.**

## **☑ Exceptions copied to the project Issues List.**

## **☑ Transports released and migrated to QA.**

### **Approvals / Sign-offs:**

### **Functional Design (section 3)**

|  |  |  |
| --- | --- | --- |
|  | **Electronic Signature** | **Date** |
| **Functional Owner (Consultant)** |  |  |
| **Client Owner (BPO)** |  |  |

### **1000035 (section 4)**

|  |  |  |
| --- | --- | --- |
|  | **Electronic Signature** | **Date** |
| **Technical Owner (Technical Lead)** |  |  |

### **User Acceptance Testing Results\* (section 7)**

|  |  |  |
| --- | --- | --- |
|  | **Electronic Signature** | **Date** |
| **Client Owner (BPO)** |  |  |

(\*with exceptions noted below)

|  |  |  |
| --- | --- | --- |
| **Priority** | **Description of Exception** | **Issue # (optional)** |
|  |  |  |
|  |  |  |
|  |  |  |

## 

## **Final Acceptance Agreement**

|  |  |  |
| --- | --- | --- |
|  | **Electronic Signature** | **Date** |
| **Project Manager** |  |  |
| **Client Owner (BPO)** |  |  |

## **Section 1: Voice of the 1000039 (VOC)** *– 5 W’s and a H*

## To be completed by the Client Owner (BPO)

**WHAT: Functional Description: (Short description of the required report)**

**WHY: Business Benefit / Need: (Short description of the why the report is needed, impact if report is not implemented)**

**WHO / WHERE: Who will be using this or where will it be used? (Who are the stakeholders? Which BPOs, departments, and users will benefit? Identify the organizational units: plants, sales organizations, etc.)**

**WHEN: When will this be used? (Daily, weekly, monthly, annually, etc.)**

**HOW: Input: (Functional description of the input)**

**HOW: Process: (Describe the process, what the program should do on functional level)**

**HOW: Output: (Functional description of the output, Existing documents)**

**[Insert attachment here]**

**Additional Comments: (Add any additional information necessary to assist in development as needed)**

**[Insert attachment here]**

## **Section 2: Response of the Consultant (ROC)**

## To be completed by the Functional Owner (Consultant)

**Alternatives Considered: (A listing of the various alternative approaches that were considered)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number** | **Description** | **Pros** | **Cons** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Agreed Upon Approach: (Which alternative was selected?)**

**Important Assumptions:**

**Additional Comments: (Add any additional information considered during the decision making process)**

**[Insert attachment here]**

Section 3: Functional Design

## To be completed by the Functional Owner (Consultant) Rework(Y/N) **Yes**

**Reference SAP R/3 Transactions/Tables/Programs: (Include: all known transactions, tables and programs that are used, or reports containing similar data. Screenshots are recommended.)**

**[Insert attachment here]**

**Input/ Selection Criteria: (What should the user see on the selection screen?)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Parameter Name**  **(as it should appear on the selection screen)** | **Required / Optional** | **Special Requirements**  **(single value or range of values, checkbox, radiobutton, matchcode, etc.)** | **Reference**  **Table-Field** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Process: (If possible, in the form of a flowchart, describe the process and what the program should do)**

**[Insert attachment here]**

**Solution: (Please enter)**  SapScript/Smartform/Adobe Print Form

**[Insert attachment here]**

**Output/Format Details: (If applicable, what should the user see on the selection screen?)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Page** (First or Next) | **Window** (ex: Main) | | **Font Name**  (if Applicable) | **Font Type**  (Bold, Italic, Underline) | **Data Origin**  (SAP field Name) | **Field Label/Description** |
|  |  |  | |  |  |  |
|  |  |  | |  |  |  |
|  |  |  | |  |  |  |

**Bar Code Requirements:**

|  |  |  |
| --- | --- | --- |
| **Serial Number** | **Field Name** | **Bar Type Code** |
|  |  |  |
|  |  |  |
|  |  |  |

**Paper Requirements: (Please Specify: pre-printed stationary, multi-page, or multi-form. If left blank, output on letter paper is assumed.)**

**[Insert attachment here]**

**Logo Requirements: (Please provide company logo in TIF, JPEG, VMP, other)**

**[Insert attachment here]**

**Software Requirements: (ex: TEC.it/ Printer Vendors DLL’s)**

**[Insert attachment here]**

**Printer Requirements: (ex: Label Printer, barcode chip, laser, Jet, Matrix)**

**[Insert attachment here]**

**Output Type and Application:**

**[Insert attachment here]**

**Security Requirements: (Describe any security considerations requiring explicit authorization checks within code or special processing considerations)**

**Yes/No**

|  |  |  |
| --- | --- | --- |
|  | **No Specific Restrictions** |  |
|  | **Restriction Based on Certain Criteria (ex: Restricted by sales area?)** |  |
|  | **Other** |  |

**[Insert attachment here]**

**Data Sensitivity: (Plant/Level of restrictions, please explain)**

**Unit Testing:** (**Information the developer can use to unit test the application. This needs to include test scenarios, instructions, test data, and expected results)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Test Condition / Test Scenario** | **Steps Involved** | **Input Values (Test Data)** | **Expected Results** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**[Insert attachment here]**

**Additional Comments: (Add any additional information necessary to assist in development as needed)**

**[Insert attachment here]**

## **Rework Log: (The version shown above is the latest, this area may contain previous version(s) of the same section)**

## 

**[Insert attachment here]**

## **Section 4: 1000035**

## To be completed by the Technical Owner (Onsite Technical Lead) Rework

**Design Points: (Describe anything that will make the definition of the design more clear, including: calculations and formulas, particular conditions where the program should behave differently, recommendations, etc. If applicable, include recommendations or concerns regarding performance.)**

**Program Logic: (Insert Visio/Pseudo code/Table or Diagram with definition of Project Flow)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Step No.** | **System object accessed / Processing done** | **Parameters passed** | | **Extracted Fields** | **Remarks** |
|  |  |  |  | |  |
|  |  |  |  | |  |
|  |  |  |  | |  |

**[Insert attachment here]**

**Special Configuration Settings/Assumptions: (Describe any special or temporary pre-requisite configuration requirements)**

**Additional Comments: (Add any additional information necessary to assist in development as needed, e.g. performance concerns)**

**[Insert attachment here]**

## **Rework Log: (The version shown above is the latest, this area may contain previous version(s) of the same section)**

## 

**[Insert attachment here]**

## **Section 5: Technical Documentation**

To be completed by the Developer **Rework(Y/N) No**

**Form Information:**

|  |  |
| --- | --- |
| **SAP Script/Smart Forms/Adobe:** |  |
| **Form Name:** |  |
| **Print Program/ FORM:** |  |
| **Package:** |  |
| **Output Type/ Application:** |  |
| **Other Custom Objects:** |  |
| **Transport Request(s):** |  |
| **Fiori (Catalog/Group/Tile):** |  |
| **Fiori (Role):** |  |
| **Gateway Transport(s):** |  |

**Actual Hours Spent: (Including technical documentation, development, and testing)**

**Offshore Estimate Breakdown: (Provided by offshore partner)**

**[Insert attachment here]**

**Offshore Approach Document: (Provided by offshore partner)**

**[Insert attachment here]**

**Unit Test Results: (Attach documents/screenshots)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Test Condition / Test Scenario** | **Expected Results** | **Actual Results** | **Tested By** | **Testing Date** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**[Insert attachment here]**

**Development Objects: (Add screenshots if necessary of the development objects – ex: programs, table definitions, search helps, etc.)**

**[Insert attachment here]**

## **Rework Log: (The version shown above is the latest, this area may contain previous version(s) of the same section)**

## 

**[Insert attachment here]**

## **Section 6: Functional Test Results**

## To be completed by the Functional Owner (Consultant)

**Functional Testing: (Document test date, test results, & notes/attachments)**

**(List the test date and results of functional testing. Please provide all test data and how the test was executed.)**

|  |  |  |
| --- | --- | --- |
| **Date** | **Results** | **Notes** |
|  |  |  |
|  |  |  |

**[Insert attachment here]**

**Errors, Bugs, and Corrections: (Document the fixes required)**

**(List the problems encountered and changes required. Provide this list to the developer for revisions.)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Number** | **Date** | **Description** | **Design Change or Bug Fix?** | **Proposed Fix** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**[Insert attachment here]**

## **Section 7: User Acceptance Test Results**

## To be completed by the Client Owner (BPO)

## [Functional Owner (Consultant) should communicate to development team]

**User Testing: (Document test date, test results & notes/attachment)**

**(List the date and results of user acceptance testing here. Any issue found at the end of user acceptance test should to be listed here. If there are remaining issues left to be addressed at the end of user acceptance testing, a sign-off can be given with the expectation that remaining issues will be addressed before the start of integration testing.)**

**[Insert attachment here]**