SOP Template

Company Name	Process Name	Date Created	Revision Number
One Touch Automation	Substantial Completion	6/6/24	1

Process Frequency (Daily/Weekly/Monthly/Project Based)

Project Based

Process Description

Substantial Completion

Who's Involved		What are the inputs?
Name	**Department or Function**	**Documents, SOW, Approval, Labor, Software, Etc.**
	PM	All Install Work Orders Completed
	Field Techs	

What are the sequential steps?

Step Description	Who is Responsible?
All Equipment has been installed on Project Site	Field Tech
All Trash/Boxes/Extra Equipment has been removed	Field Tech
All Work Orders for Installation have been completed	PM
All Final Equipment Install Checklists have been completed	Field Tech
Project no longer requries Field Techs to perform installation work	PM
System is operational	Field Tech

What are the outputs [Defined Standards of Completion or Deliverables]

Final Install Checklist Completed and turned in to PM

Who does the process transfer to next?

Name	Department or Function	Milestone
	PM	Schedule Final QC