

Standard Operating Procedure Report



Name:	
Organization:	
Phone/Mobile:	
E-mail Id:	

Suggestions/Inputs: Yes / No

1. Suggestion/inputs on the structure of report/guidelines/operating procedures.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Suggestion/inputs on worker qualification evaluation.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Suggestion/inputs on equipment and tools/consumable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Suggestion/inputs on installed material like pipe and other appurtenances.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Suggestion/inputs on precautionary steps for avoiding future road settlement/cave-ins.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Suggestion/inputs on road restoration after the project completion.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Suggestion/inputs on remedial measure for road restoration, in case of road settlement/cave-ins at a later date.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Suggestion/inputs on certification procedure for the works.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Suggestion/inputs on any other issue of importance.

1.
2.
3.
4.
5.

Signature

* Please use extra sheets if space available is insufficient.