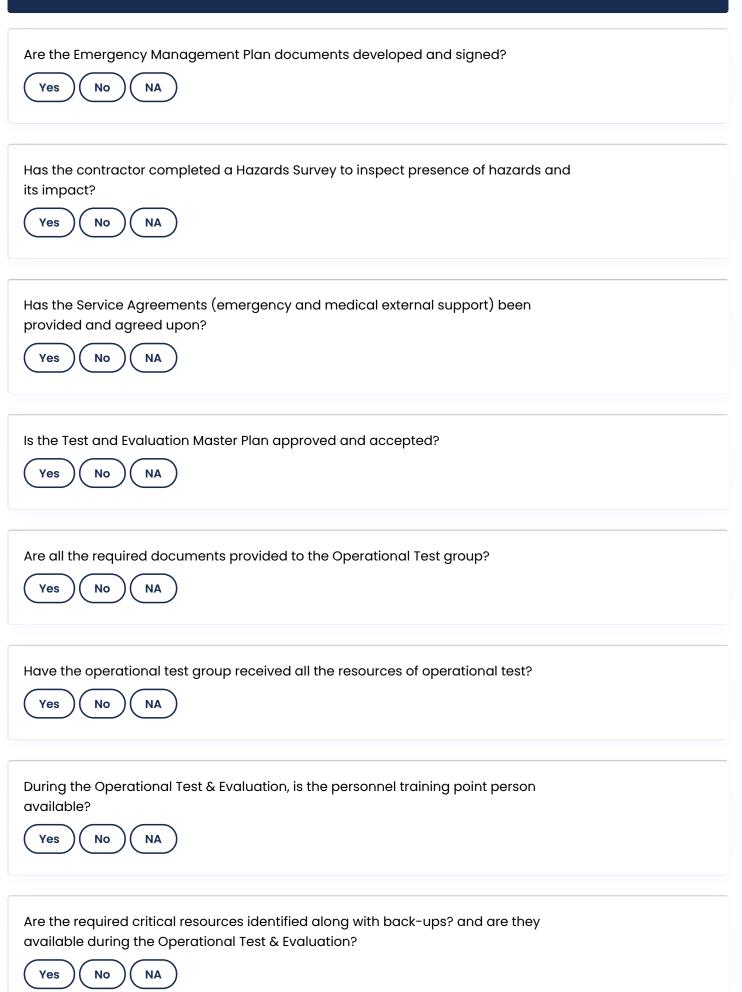# Operational Readiness Checklist Template

Construction

AUDIT VERIFICATION

Project manager's name

Please validate the inspection with signature

SIGNATURE

Date

DATE

2017-01-01

DOCUMENTATION PROCESS

Which of the following plans are developed?

☐ System Engineer program   ☐ Startup plan   ☐ Engineering procedure set

Which of the following plans are approved?

☐ System Engineer program   ☐ Startup plan   ☐ Engineering procedure set

Are the documents reviewed and signed by the business owner?

(Yes) (No) (NA)

Is there any difference of manpower count from that of the plan?

(Yes) (No) (NA)

EMERGENCY ACTION

Are the Emergency Management Plan documents developed and signed?

Yes   No   NA

Has the contractor completed a Hazards Survey to inspect presence of hazards and its impact?

Yes   No   NA

Has the Service Agreements (emergency and medical external support) been provided and agreed upon?

Yes   No   NA

Is the Test and Evaluation Master Plan approved and accepted?

Yes   No   NA

Are all the required documents provided to the Operational Test group?

Yes   No   NA

Have the operational test group received all the resources of operational test?

Yes   No   NA

During the Operational Test & Evaluation, is the personnel training point person available?

Yes   No   NA

Are the required critical resources identified along with back-ups? and are they available during the Operational Test & Evaluation?

Yes   No   NA

Does the report have complete information on Development Test and Evaluation (DT&E)?

(Yes)　(No)　(NA)

Has the DT&E data been reviewed and received by the operational test team?

(Yes)　(No)　(NA)

ENVIRONMENTAL SAFETY

Does the facility comply with environmental compliance requirements?

(Yes)　(No)　(NA)

Does the system comply with the following?

☐ Occupational safety　☐ Health requirements　☐ Hazardous wastes

Have the authorities approved the documents of safety management system?

(Yes)　(No)　(NA)

OVERALL COMMENTS/SUMMARY

Conclusion

textarea

PROJECT DETAILS

Mention the Project title

textarea

Business Requirements

textarea

Purpose of the project

textarea

Mention the names of the stakeholders

Mention the name of Reviewer/Analyst

STARTUP PLAN

Is the commission plan made and accepted?

Yes   No   NA

Is the Maintenance Program Plan developed and accepted?

Yes   No   NA

Is the Startup Plan developed and accepted?

Yes   No   NA

Is the Startup Review Board Charter developed and approved?

Yes   No   NA

TRAINING PLANS

Is the service training plan approved?

Yes No NA

Is the service training plan given to operational Test group?

Yes No NA

Is the training regulated to all the personnel as per the plan?

Yes No NA