

# Checking Form for OPERATING INSTRUCTIONS



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Rev.1

# Checking Form for OPERATING INSTRUCTIONS

Project:		Leader:		Date:	
Reference Doc.:		Team:		Page:	of

ITEM	GUIDE	CONSEQUENCES IF		RECOMMENDATIONS	Respons.	DATE
1	WHAT must be done?	NOT done				
2	WHEN must it be done?	Done EARLIER	Done LATER			
3	WHERE must it be done?	Done ELSEWHERE				
4	HOW must it be done?	Done DIFFERENTLY	Done PARTIALLY			
5	HOW MUCH must be done?	Done LESS	Done MORE			
6	HOW FAST must it be done?	Done SLOWER	Done FASTER			
7	HOW FREQUENTLY must it be done?	Done with HIGHER FREQUENCY	Done with LOWER FREQUENCY			
8	WHO must do it?	If done by SOMEONE ELSE				

