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| **Organisation:** | **Venue:** | | Date: |
| **Department responsible:** | | | |
| **Job / Task:** | | | |
| **Prepared by** (Name)**:** | **Signature:** | **Issue No:** | **Issue Date:** |

| **Step #** | **Task / Job Step Description** | **Instructions** | **Images** |
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| **SIGN ON** | | | | | | | |
| *I have taken part in the development of this SOP / have been briefed on and understand the contents of this SOP* | | | | | | | |
| **Date** | **Time** | **Name** | **Signature** | **Date** | **Time** | **Name** | **Signature** |
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