

# Contractor Project Transition Checklist

Date: [Insert Date]

To: [Contractor's Name]

From: [Your Name/Company]

Subject: Project Transition Checklist

## Project Details

Project Name: [Insert Project Name]

Project Start Date: [Insert Start Date]

Expected Completion Date: [Insert Completion Date]

## Checklist Items

- Review of Project Scope: [Status]
- Finalization of Budget: [Status]
- Document Deliverables: [Status]
- Handover Procedures: [Status]
- Resource Allocation: [Status]
- Risk Assessment: [Status]
- Final Meeting Scheduled: [Date]

## Additional Notes

[Any additional notes or instructions related to the project transition]

Thank you for your attention to these details. Please confirm receipt of this checklist and your agreement with the items listed.

Sincerely,  
[Your Name]  
[Your Position]  
[Your Company]