The purpose of a Shutdown Notification is to provide the tenants of a building with adequate notice for the temporary disruption of a building related service. This form is to be used by a Maintenance Planner or PM to coordinate the shutdown of a service in circumstances when the shutdown will impact tenants of a building.

### Shutdown Request Information

**Building:**  

**Rooms:**  

**Scope of Project Requiring the Shutdown:**

- [ ]  
- [ ]  
- [ ]  
- [ ]

**System that needs to be shut down:**

**Schedule Constraints:**

**Required Duration of Shutdown:**

**Shutdown Requestor (PM/MP/CA):**

**Name:**  

**Phone Number:**  

**Email Address:**  

**Date:**

**WO Information:**

- [ ] Existing WO#  
- [ ] Project FP#  
- [ ] New WO req’d

### Shutdown Impact Information

**Detailed Impact of Shutdown:**

- [ ]  
- [ ]  
- [ ]  
- [ ]

**Impacted Area(s):** (attach shaded floor plan if more than one room impacted)

**Building(s):**  

**Floor(s):**  

**Room(s):**

**Safety Control:**

- [ ] Lock out/Tag out  
- [ ] Fumehood Containment  
- [ ] Other

**Impacted Systems:**

- [ ] Normal Power  
- [ ] Emergency Power  
- [ ] Steam  
- [ ] Domestic Water  
- [ ] Fumehood Exhaust  
- [ ] Other

**Attachments:**

- [ ] Shaded Impact Zones  
- [ ] Single-lines  
- [ ] Panel Directories  
- [ ] Other

**Impact Defined by:**

**Name:**  

**Date:**

Sept. 18, 2018
### Tenant Confirmation
To be completed by SBA (or PM/MP/CA if no SBA)

#### Tenants Contacted:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Phone</td>
</tr>
</tbody>
</table>

#### Tenants Contacted by: ____________________________ Date: ____________

#### Shutdown Confirmation
To be coordinated by PM/MP/CA

| Confirmed Shutdown Date: ____________________________ | Time: ____________ |
| Confirmed Service Reinstatement Date: ____________ | Time: ____________ |

Project Manager/Maintenance Planner: ____________________________

Corrective Maintenance/Operations Manager, Electrical Inspector or Contractor: ____________________________

SBA (if involved): ____________________________