



UNIVERSITY of WASHINGTON

CAPITAL PLANNING & DEVELOPMENT

UNIVERSITY OF WASHINGTON

UTILITY SHUTDOWN REQUEST

PHYSICAL PLANT

Urgent Request

(Initial for Urgent Service-Less than 14 days)

Submittal Date	Requester	
Shutdown Date	Start Time	Duration
Proposed Scope of Work		
Requisition/Job Number	Work Order Number	
Project Name	Project Number	
Contractor Name	Telephone Number	
Project Supervisor	Telephone Number	
UW Project Coordinator	Telephone Number	
Maintenance Coordinator Review		
Systems Affected:		
_____	Plumb. Shop _____	Refrig. Shop _____
_____	Hospital Shop _____	Signal Shop _____
_____	Elect. Util. Shop _____	Elect. Shop _____
_____	Comm. Center _____	Controls Shop _____
_____	FOMS Shop _____	Plant Ops. Mgmt. _____
_____	Power Shop _____	Elevator Shop _____
_____	Const. Coordinator _____	Contractor _____
_____	Other _____	Other _____
_____	HS Bldg. Mgr. _____	UWMC Bldg. Mgr. _____
_____	Bldg. Coordinator _____	Other _____
_____	Other _____	Other _____
_____	Environmental Health	
<b>SHUTDOWN APPROVAL</b>		
Maintenance Coordinator/Supervisor Signature	Date	
Outage Program Coordinator Signature	Date	