

PLANNED INTERRUPTION OF UTILITY SERVICE

Section 1 – Completed by the party requesting the outage

Start Date and Time:	Date	Date Notified:	
Duration or End Date and Time:			
Name of Requester:			
Point of contact for party conduct	ing the work:		
Affected Utility Services/Including	g Fire Suppression/Alarms:		
Scope and purpose of work to be	performed:		
Fire Watch required? Yes: Comments:	No:		
Section 2 – Completed by the Utilisolation Points:	ility Services Project Manag	jer	
Affected Building(s)			
Section 3 – Completed by the Are	ea Manager		
Area Manager: Comments:			
Section 4 – Completed by the Uti	ilities Manager or Associate	Director	
Approval & Date:			
Distribution List after Confirmation: Requester US Associate Director US Engineers FM Area Managers	FM Director FM Engineering AD Planning, Design, and Const. US Director	FM Facilities Maintenance Mgr US O&M Manager US Project Manager US Water Supervisor	