



Engineering & Maintenance

## UTILITY SHUTDOWN REQUEST

**NOTE:**

- 1. TWO WEEKS notification is required for all shutdowns.
- 2. All shutdowns must be scheduled through the WCM Project Manager.
- 3. Any work involving hot work must be scheduled with EHS. A Hot Work Scheduling Request Form is required for all work outside of normal business hours.

WCM Project Name:

WCM Project Manager:

Contractor:

Contact Name:

Office Phone:

Cell Phone:

System Type:

Building:

Areas Involved:

Requested Shutdown  
Date:

Start / Finish Times:

WCM Acct #:

Project Manager  
Approval:

Date:

E&M Approval:

Date:

Plant

Service

BRB

Electrical

Off-site

Comments:

*Original: Project Manager*

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*Depts: EHS - ehs@med.cornell.edu*

Email the completed form to: [USR@med.cornell.edu](mailto:USR@med.cornell.edu)