Planned Outage and Interruption Request

Work Owner	Orga	niza	ation		Phone				
Onsite Contact	Phon	e_							
Project #	Custo	me	er Request	WO Number					
		Inte	erruption Type						
D. Halland C. alana	Building Access Control		Elevator		Laboratory Utility		Sanitary Sewer		
Interruption or Building Space	Electric Power		Heating Ventilation & A/C (HVAC)		Natural Gas		Domestic Water		
Building System Interruption or Building Space Closure Only if part of a building is out, Check all that apply) Dutside Closures Life Safety Systems Notifications Description of Work Accuracy of the second of	Building Space/Entrance		Telephone/IT		Fumehood		Cooler/Freezer		
out, Check all that apply)	Other (Explain below)								
	Electric Power		Natural Gas		Laboratory Utility Natural Gas Fumehood Sewer from Building Steam (Central Plant) Bike Lane Traffic Signal Special Hazards Other (Explain below)		Domestic Water		
(If entire building is out)	Hot Water (Central Plant)		Chilled Water (Central Plant)	(Central			Other (Explain Below)		
Onsite Contact Project # Building System Interruption or Building Space Closure (Only if part of a building is out, Check all that apply) Utility Outage (If entire building is out) Outside Closures Life Safety Systems Notifications Description of Work A Building(s) or Location Specific Space Affecte How are the building of	Roadway		Sidewalk		Bike Lane		Waste Receptacle		
Outside Closures	Parking Spaces		ADA Facilities			NO Number_ tory Sa Se I Gas De W ood Co from De g W II CE s Fil below)	Other (Explain below)		
Life Cofee, Contains	Fire Alarm		Sprinkler System and/or Fire Pump		_		Fire Hydrant		
Life Safety Systems	Is fire watch required (Determined by Risk Safety and Universit	Ma	_						
Notifications	Unplanned Outage		Preventative Maintenance						
Description of Work Ad	ctivity							_	
Building(s) or Location	(s) Affected								
Specific Space Affected	l (Room Numbers) _							_	
How are the building c	lients or University s		keholders affecte		What will the	y no	tice?		
Schedule:								_	

Start Date:______End Date:_____End Time:_____

Planned Outage and Interruption Request

Planning Reviews (Per Review Matrix):

Organization	Review Required?	Reviewer	Review Date
Maintenance Zone Supervisor			
Utility Supervisor			
Other			
Other			

Client Approvals (Per Approval Matrix):

Organizations Affected by Work, Interruption, or Outage								
Client	Client Building(s) Key Contact							

Facilities Management Approvals (Per the Approval Matrix)

	Facilities Management										
ı	Maintenance			Utility	y and Energy		Construction				
Approval Required?	Approved By:	Date	Appro Require		Approved By:	Date	Approval Required?	Approved By:	Date		
Uni	For Life Safety Systems University Engineer Risk Management and Safety										
		-									
	Work Management										
Reco	Received By: Date Received Time Received Date Notice Issued Time				Time Issue	d					

Submittal:	
Work Owner Signature:	Date

Planned Outage and Interruption Request

Building Systems Interruption Request Form Instructions

Purpose

This form is required any time a planned interruption, utility outage, or space closure is needed. The intent is to document approval and provide the information necessary for concise communication of planned outages and interruptions to the campus and others with need to know. It is also used to provide information necessary to communicate unplanned outages, Preventative Maintenance, and other activities to the campus community.

The Work Owner is responsible for planning and scheduling the outage or interruption, obtaining the necessary approvals, and submitting the completed form to Work Management. Work Management will then issue the communication to the appropriate campus stakeholders.

Form Information

- 1. **Work Owner** –Individual responsible for conduct of the work requiring the interruption or outage. Include Auburn University Organization and cell phone number.
- 2. **Onsite Contact** Individual directly responsible for the conduct of the work and typical will be on site during implementation. Include cell phone number.
- 3. **Project Number –** Auburn University Facilities project number if applicable
- 4. **Customer Request-** AiM Request number if applicable.
- 5. **WO Number –** AiM work order number if applicable.
- 6. **Interruption Type** Select the system, component or space type that will be interrupted and out of service. Select all that apply, however if a utility outage is selected and the entire building will be interrupted do not select individual building systems. As example, do not select HVAC in a building if electric power will be off to the entire building.
- 7. **Life Safety Systems -** Outages on these systems are required if the system itself is taken out of service, or if any other system (domestic water, electric power) is taken out of service and prevents life safety from functioning. Outages on life safety system require approval of Risk Management and Safety and University Engineer. They will determine if a fire watch will be required.
- 8. **Description of Work Activity –** Describe specifically what work will be performed during the outage.
- 9. **Building(s)** or **Location(s) Affected** List all buildings affected using official university name. If outside space describe the location of the activity including buildings that will be directly impacted if necessary.
- 10. **Specific Space Affected** Provide floor, room numbers, or area of the building that will be affected.
- 11. How are the building clients or University stakeholders affected? What will they notice? Provide sentence on the specific impact of the outage and describe what University stakeholders will notice.
- 12. **Schedule –** Provide start and estimated end dates and times
- 13. **Planning Reviews** Discussions conducted with designated individuals during the planning and scheduling phase of the outage or interruption. The review matrix defines the minimum reviews required, additional reviews may be required depending on the nature of the work. No signature or hard approval documentation is required for reviews.
- 14. **Client Approvals** Obtain approval of Key Contact of all organizations with assigned space in affected buildings or in buildings near the work. Client approval can be documented with e mail or signature on the form
- 15. **Facilities Management Approvals** Obtain necessary approval based on the type of outage and the required approvals from the approval matrix.
- 16. Work Manager Signature Sign and date the form and submit to Work Management

Auburn University Facilities Management

Planned Outage and Interruption Approval Matrix 09/11/2015

Forms	Maintenance	e Management	Utility Ma	inagement	Construction	Management	Universit	y Engineer	ingineer Risk Management and Safety		Organization Affected By Work, Interruption, or Outage	
Interruption Classification	Approval Required?	Approvers	Approval Required?	Approvers	Approval Required?	Approvers	Approval Required?	Approvers	Approval Required?	Approvers	Approval Required?	Approvers
Building System Interruption Building Space Closures ⁽¹⁾	Yes All	One of the following ⁽²⁾ : Lloyd Albert Bob Hix John McGuckin	No		Yes Only those with Construction Management as Work Owner	One of the Following: Mitch Walley Scott Fuller	No		No		Yes	Key Contacts for all organizations with assigned space in affected building or in buildings near the work
Utility Outage ⁽¹⁾	Yes All	One of the following: Lloyd Albert Bob Hix John McGuckin	Yes All	One of the following: Ken Martin Malcolm Dailey Eric Moore	Construction Management as Work	One of the Following: Mitch Walley Scott Fuller	No		No		Yes	Key Contacts for all organizations with assigned space in affected building or in building near the work
Outside Closures	Yes All	One of the following: Lloyd Albert Bob Hix John McGuckin	Yes Only those with Utilities and Energy as Work Owner	One of the following: Ken Martin Malcolm Dailey Eric Moore	Construction Management as Work	One of the Following: Mitch Walley Scott Fuller	No		No			Parking Services - Don Andre Tiger Transit- Rex Huffman Affected Client if applicable as determined by Work Owner's approver
Life Safety Systems Fire Alarm Sprinkler System and/or Fire Pump Special Hazards Systems	Yes All	One of the following: Lloyd Albert Bob Hix John McGuckin	No		Yes Only those with Construction Management as Work Owner	One of the Following: Mitch Walley Scott Fuller	Yes All	Mark Aderholt	Yes	MaryAnn May Future: Jon Haney	No	
Notifications: Emergency Outage Preventative Maintenance, Other	No		No		No		No		No		No	

Notes:

(1) If Interruption or Outage affects Fire Alarm, Sprinkler and/or Fire Pump, or Special Hazards System, then also follow Life Safety approval protocol

(2) Interruption request shorter than five working days require Maintenance Director Approval

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Auburn University Facilities Management Planned Outage and Interruption Review Matrix Draft 9/01/2015

Interruption o	r Outage	Draft 9/01/2019 Ma	aintenance	Utilities and Energy		
Interruption Classification	Type Interruption	Review Required	Reviewer	Review Required	Reviewer	
Building System Interruption Building Space Closures	All	Yes All	Maintenance Zone Supervisor	No	N/A	
	Electric Power	Yes All	Maintenance Zone Supervisor	Yes	Keith Nall	
	Natural Gas	Yes All	Maintenance Zone Supervisor	Yes	Barry Walker	
	Water to Building	Yes All	Maintenance Zone Supervisor	Yes	Barry Walker	
Utility Outage	Sewer from Building	Yes All	Maintenance Zone Supervisor	Yes	Barry Walker	
	Chilled Water to Building (Central Plant)	Yes All	Maintenance Zone Supervisor	Yes	David Howell	
	Hot Water to Building (Central Plant)	Yes All	Maintenance Zone Supervisor	Yes	David Howell	
	Steam to Building (Central Plant)	Yes All	Maintenance Zone Supervisor	Yes	David Howell	
Outside Closures Roadway Parking Spaces Sidewalk ADA Facilities Bike Lane Traffic Signal Waste Receptacle	All	No	N/A	No	N/A	
Life Safety Systems Fire Alarm Sprinkler System and/or Fire Pump Special Hazards Systems	All	Yes All	Maintenance Zone Supervisor	No	N/A	
Notifications: Unplanned Outage Preventative Maintenance Other	All	No	N/A	No	N/A	