

UNIVERSITY OF CALIFORNIA, SANTA CRUZ

UTILITY SHUT DOWN

LOCATION(S): _____

UTILITY THAT WILL BE SHUT DOWN:

SCHEDULED DATE(S): _____

SCHEDULED TIME: _____ TO: _____

REASON: _____

REQUESTED BY: _____

PHONE: _____ RADIO: _____
DATE: _____

ALL PHYSICAL PLANT SERVICES SHUT DOWN REQUEST PROCEDURES
HAVE BEEN FOLLOWED: YES _____ NO: _____

DATE OF COORDINATION MEETING: _____

PLEASE NOTIFY ALL UNITS AND/OR DEPARTMENTS IN YOUR BUILDING OR
AREA THAT WILL BE AFFECTED BY THIS UTILITY SHUT DOWN. FOR
ELECTRICAL SHUT DOWNS, BE SURE THAT ALL COMPUTER TERMINALS IN
YOUR AREA ARE TURNED OFF BEFORE THE SCHEDULED TIME TO AVOID
PROBLEMS. THANK YOU FOR YOUR COOPERATION.

FOR FURTHER QUESTIONS OR INFORMATION, PLEASE CONTACT THE
"REQUESTER" OR THE PHYSICAL PLANT SERVICES WORK CONTROL DESK
AT 459-4444.