



Form

Building Systems Shutdown Permit

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Version: 03

Project Name:			
Capital Project Number:			
Initial Application Date:			
Facility Name:		Bldg ID#	
Permit #			
Permit Revision / Renewal #			
Date of Revision:			

Permit for Planned shutdowns require 10 business days advance notice.

Refer to accompanying flow chart for process flow for permits

SECTION A SHUTDOWN REQUEST INFORMATION – to be filled out by the contractor			
	Name		Number
City Project Manager			
Type of Shutdown	<input type="checkbox"/> Routine	<input type="checkbox"/> Planned	<input type="checkbox"/> Emergency
Contractor Contacts	Name		Number
Company			
Site Work Contact (who will be present for the duration of the work)			Cell:
			Email:
After Hours Contact			
Dates and Time of Work	Date		Time
Start:			
End:			

VER	Date	Revision Summary	Author
03	2020-06-23	Issued in QMS	Shawn Allers

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Reason for the Shutdown, Description of work (includes work plan and drawing of work area – refer to procedure for sample of work plan).

Note: Consider the following when filling in this section. Will the shutdown activities impact IT/OCT, Security, building users / staff, any specialty systems? Is there the potential for weather to impact the affected area or users as a result of the shutdown?

Will Temporary Services be provided? If so, describe what level of coverage.

Example – domestic water will be shut down and bottle water will be provided for drinking and coffee areas.

SECTION B - SHUTDOWN EFFECTS

Contractor to check boxes for all systems that will be affected by the shutdown.

Items in Red font require pre-activity meetings to plan out shutdowns. All work involving energy isolation (separate permit) requires pre-activity meetings

The Project Manager is to notify:

1. Insurance and Claims Management on any Fire Alarm or Gas Detection system impairment that will last longer than **8 hours** and
2. COE Fire Rescue on any impairment of the fire alarm system that lasts longer than **2 hours**.

Mechanical				Electrical				Other	
<input type="checkbox"/>	Air Handling	<input type="checkbox"/>	Fire Pump	<input type="checkbox"/>	Building Power	<input type="checkbox"/>	Motor Control Centers	<input type="checkbox"/>	Elevators
<input type="checkbox"/>	Fume & Dust exhaust systems	<input type="checkbox"/>	Boilers	<input type="checkbox"/>	CDP, MDP, Main Tie Main and major sub panels			<input type="checkbox"/>	Traffic re-routing
<input type="checkbox"/>	Building Heating	<input type="checkbox"/>	Compressed air	<input type="checkbox"/>	Building Security	<input type="checkbox"/>	Gas Detection and alarms	<input type="checkbox"/>	Building Access / Egress
<input type="checkbox"/>	Building Cooling	<input type="checkbox"/>	Special Water systems	<input type="checkbox"/>	Secondary electrical distribution panels	<input type="checkbox"/>	Fire Alarm – panels, detection, annunciation	<input type="checkbox"/>	Interior Finishes
<input type="checkbox"/>	Domestic Cold Water	<input type="checkbox"/>	Domestic Hot Water	<input type="checkbox"/>	Emergency Generator	<input type="checkbox"/>	IT / OCT– Network and Switches	<input type="checkbox"/>	Special Applied Flooring
<input type="checkbox"/>	Controls (BMS)	<input type="checkbox"/>	Chillers	<input type="checkbox"/>	Variable Speed Drive	<input type="checkbox"/>	Phones	<input type="checkbox"/>	Washrooms
		<input type="checkbox"/>	Sprinklers	<input type="checkbox"/>	User Equipment / special systems	<input type="checkbox"/>	Lighting	<input type="checkbox"/>	Staff



Special Precautions if any that are required: (examples – welding screens for cutting, or barriers for high work, sprinkler system isolation requiring fire watch – refer to other permits that may be required)

Date of Pre-Activity Meeting and listing of required attendees

Required Attendees	Date

Notes:

- Daily step back meetings are required for activities that could result in business disruption, impact life safety, could affect the public or will require the COE to look after select systems during the shutdown period.
- Other permits that could be required for work include Gas Detection, Hazardous Energy Isolation (LOTO), Hot Work, Ground Disturbance, Roof Access, Traffic Disruption, Confined Space, and Hazardous Waste Removal

Contractor to Identify Other Project Specific Permits or Plans Required

<input type="checkbox"/>	Hot Work	<input type="checkbox"/>	Hazardous Energy Isolation (Lock Out Tag Out)	<input type="checkbox"/>	Traffic Disruption
<input type="checkbox"/>	Ground Disturbance / Slab Penetration (Excavation)	<input type="checkbox"/>	Roof Access		
<input type="checkbox"/>	Confined Space	<input type="checkbox"/>	Hazardous Waste Removal		

Are External Permits or Notifications Required for:

	Yes	No
City Fire – Changes to hydrants, restrictions / changes to fire access, water service, or impairments to fire alarm exceeding 2 hours.	<input type="checkbox"/>	<input type="checkbox"/>
EPCOR – Power interruption / Re-energization	<input type="checkbox"/>	<input type="checkbox"/>
ATCO – Natural Gas Isolation / Re-Establishment	<input type="checkbox"/>	<input type="checkbox"/>
Inspection Group – Inspection of completed work	<input type="checkbox"/>	<input type="checkbox"/>
City Security – Shut down or interruption to building security	<input type="checkbox"/>	<input type="checkbox"/>
Insurance and Claims Management for Life safety (fire alarm / gas detection) shut downs longer than 8 hours	<input type="checkbox"/>	<input type="checkbox"/>

Contractor is responsible for notifications to groups identified.



MANDATORY REQUIREMENTS - FIRE ALARM AND SECURITY ISOLATION

This section is information as a reminder to contractors on tasks that are to be completed as part of work activities on projects having fire alarm and security isolation.

YES	NO	FIRE ALARM ISOLATION is REQUIRED UNDER THIS PERMIT
<input type="checkbox"/>	<input type="checkbox"/>	
		<ul style="list-style-type: none"> Project Manager must obtain a Safety Plan from the contractor before work begins. A Safety Plan must be reviewed and approved to ensure it is adequate for the work being done. Contractors are responsible for having their own fire watch on site if required.
		<ul style="list-style-type: none"> COE Insurance and Claims Management will require a copy of the safety plan and the shutdown permit for their records prior to the system being deactivated.
		<ul style="list-style-type: none"> The description of work for the shutdown is to include a description of panels, devices and network that is being isolated.
		<ul style="list-style-type: none"> Just prior to the shutdown occurring the contractor shall contact COE Fire Rescue (through City approved maintenance contractor) on scope and duration of work (non-emergency)
		<ul style="list-style-type: none"> Dedicated Fire Watch in place for the duration of the outage, with walk through inspections on 15-minute intervals unless an approved engineered solution has been implemented.
		<ul style="list-style-type: none"> Contacted COE approved Fire Alarm contractor (Tyco) to disable fire alarm monitoring and provide notification to COE Fire Rescue.
		<ul style="list-style-type: none"> Approved maintenance contractor is Tyco -- contact ewen.white@jci.com cell 780 699 6435
YES	NO	SECURITY SYSTEM ISOLATION is REQUIRED UNDER THIS PERMIT
<input type="checkbox"/>	<input type="checkbox"/>	
		<ul style="list-style-type: none"> Contacted COE corporate security on isolation (780 - 496-8888)
		<ul style="list-style-type: none"> Describe panels, devices and cameras that are being shut down in the work plan
		<ul style="list-style-type: none"> Contacted COE corporate security and COE FMS once the work is completed and the system is tested and re-instated as operational. Refer to procedure for testing requirements that need to be undertaken prior to contacting COE corporate security. COE corporate security may undertake a commissioning final check.
		<ul style="list-style-type: none"> Notified COE Facilities Operations once the system is re-instated by email



SECTION C - REVIEW OF SHUTDOWN REQUEST

Notes:

- COE project manager to fill out contact names and if review is required or for information only.
- Only groups requiring INPUT to be on circulation, groups noted as information only do not return form to COE Project Manager.

Circulation Requirements				Reviewed		
Need to Review	Inform Only	Section	COE Contact - Name and Number/Email	Date YYYY-MM-DD	Yes	No
	<input type="checkbox"/>	Security				
	<input type="checkbox"/>	EHS				
<input type="checkbox"/>	<input type="checkbox"/>	PRT Mechanical				
<input type="checkbox"/>	<input type="checkbox"/>	PRT Electrical				
<input type="checkbox"/>	<input type="checkbox"/>	PRT Structural / Arch				
<input type="checkbox"/>	<input type="checkbox"/>	Facility Operations (1)				
<input type="checkbox"/>	<input type="checkbox"/>	Facility Operations (2)				
<input type="checkbox"/>	<input type="checkbox"/>	Facility Engineering				
<input type="checkbox"/>	<input type="checkbox"/>	IT - Corporate OCT				
<input type="checkbox"/>	<input type="checkbox"/>	IT - Police				
<input type="checkbox"/>	<input type="checkbox"/>	IT - Fire				

SECTION D - REVIEW COMMENTS -- (section for feedback by review team)

Note: If review is undertaken in a construction meeting and comments captured in meeting minutes put discussion in section below- or – note resolution and construction meeting number and date.



SECTION E - SHUTDOWN APPROVED (filled out by COE project manager)

Sign Off – Issued to COE Project Manager			
	Name (Print)	Signature	Date
City Project Manager			
Operations Supervisor			
IT / OCT*			
HSE**			

Note: *As required
 ** Copy of permit if environmental monitoring, hazardous material abatement is required.
 ** Copy of permit to Corporate Occupational Hygiene Consultant

SECTION F - NOTIFICATION TO OCCUPANTS

Posting of notification of shutdown and effects to occupants is required. Project Manager to notify Facility Operations Manager on shut and effect on operations for posting of signage for the shutdown. Refer to sample template

	Name (Print)	Signature	Date
Project Manager - or -			
Building Operations			

SECTION G - SHUTDOWN CLOSE OUT

Close out of the permit is the responsibility of the contractor. A copy of the permit signed off and verified as complete is to be returned to the City of Edmonton project manager.

	Name (Print)	Signature	Date
Contractor			

All completed permits to be returned to the City of Edmonton Project Manager

Refer to procedure for definitions, additional information and sample notifications