Cleveland Clinic

UTILITY SHUTDOWN FORM

Request for service interruption or service restoration

Permit Number:
Requester Name:
Requester Number:

Description of Shutdown/ Restoration Request

Service(s) we request shutdown during this requested work period:

Domestic Cold Water	Natural Gas	Medical Air	Chilled Water	Nurse Call
Domestic Hot Water	Sprinkler	Nitrous Oxide	Air Handling	Fire Alarm
D.I. Water	Oxygen	Heating Hot Water	Normal Power	
Sanitary	Vacuum	Steam	Emergency Power	

10 DAY NOTIFICATION REQUIRED

- Contractor needs to contact the Cleveland Clinic Facilities Management Team for the work that is being performed at that particular site. Contact list is located below.
- All Fire Alarm and Sprinkler shutdowns outages will require a fire watch log.

Interruption Request Date:

Requested Duration:

Main Campus Sub Market				
Facilities Management Office	216-444-9459			
Maintenance Control	216-445-4338			
Children's Rehab Plant Operations Office	216-448-6297			
East Region Sub Market				
Hillcrest Facilities Office	440-312-3257			
Mentor Facilities Office	440-578-3023			
Euclid Facilities Office	216-692-8659			
South Pointe Facilities Office	216-491-7475			
Marymount Facilities Office	216-587-8284			
West Region Sub Market				
Fairview Facilities Office	216-476-7649			
Avon Facilities Office	440-695-5290			
Lutheran Facilities Office	216-363-2009			
Lakewood FHC Facilities Office	216-237-5667			

Requester Name

Title:

Phone:

South Region Sub Market				
Akron General Facilities Office	330-344-6053			
Lodi Facilities Office	330-948-5503			
Mercy Facilities Office	330-489-1136			
Union Facilities Office	330-343-3311 ext. 2567			
Medina Facilities Office	330-721-5010			
Florida Sub Market				
Weston Facilities Office	954-689-5025			
Indian River Facilities Office	772-567-4311 ext. 2222			
Martin Tradition Facilities Office	772-345-537			
Martin South Facilities Office	772-223-5945 ext.131000			
Martin North Facilities Office	772-223-5945 ext.131000			
FRIC Facilities Office	772-345-8100 ext. 18246			

Email completed form to assigned reponsible party (RP). Project number, project name, and utility request must be in the subject line.

Example: 5619858 – FV Cath Lab Renovation, Fire Alarm Shutdown