

FORM 6: LIFE SAFETY SYSTEM SHUTDOWN REQUEST

Ver. #:

Date:

Instructions: Complete this form on to request for a shutdown of building life safety systems. All shutdowns require the system to be put onto **full test**.

Submit this request for approval by the BCIT Facilities Electrical Foreperson/Manager within 5 business days of the shutdown date(s), and the completed form submitted to SSEM Projects within 3 business days.

Contractors are responsible for providing fire watch and any other provisions required for indoor hot work activities. If the shutdown request is related to hot work, the end time must include fire watch 30-minutes after the hot work is completed.

Contractors must ensure that signage is posted at all entryways for areas affected by the shutdown, with signage clearly explaining the extent and scope of the shutdown.

Project #:	BCIT Liaison:	Cell #:
Prime Contractor (if none, state BCIT):		
Company Requiring Shutdown:		
Supervisor Name:	Cell #:	

REQUESTED SERVICE(S)

Building(s)/Areas	Date and Times	Reason/Scope
	Date(s): to	
	Date(s): to	
	Date(s): to	
	Date(s): to	
	Date(s): to	

APPROVALS

CPF Approval: Signature from a CPF Electrical Trades Manager/Foreperson indicates that a BCIT electrician will be assigned to perform the shut down activities at the given dates/times.

Name:	Signature:	Date:
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SUBMIT SIGN AND APPROVED FORM TO SSEM PROJECTS WITHIN 3-BUSINESS DAYS; DO NOT PROCEED UNLESS SSEM CONFIRMS THE SHUTDWON.

SSEM USE ONLY

Date Received:	<input type="checkbox"/> Security Notified	<input type="checkbox"/> Shutdown Confirmed
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