



Project Manager/Facilities Manager:

Project Manager/Facilities Manager Email:

Coral Gables Campus

RSMAES

Richmond / C-Stars

WATSCO Center

Project Manager/Supervisor to complete boxed portion and submit to Facilities Work Control with a Minimum of 48 hours in advance of Shutdown or Impairment

Date of Notice: _____ Service Req. #: _____ Work Order #: _____

Has this been scheduled with the customer?	
Yes	No

The following will be shutdown/impaired: (please check one)

Air Conditioning
 Electricity
 Fire Pump
 Special Extinguisher System
 City Water
 Underground Tank

Automatic Sprinklers
 Alarm System
 Other (please specify) _____

Scope of work _____

Type? Planned Emergency Hidden Long-term Ongoing
 Trade required on site: Plumber Electrician HVAC Other _____

Date of Impairment/Shutdown: FROM: _____ TO: _____
 Time of Impairment/Shutdown: FROM: _____ TO: _____
 Estimated Restoration Date: _____ Estimated Restoration Time: _____ (am / pm)

Project Manager / Supervisor: _____ Phone: _____ Emergency: _____
 Contractor/Vendor: _____ Phone: _____ Emergency: _____

The following building(s) will be affected:

To be completed by the PROJECT MANAGER / SUPERVISOR

Project Manager / Supervisor to notify of Shutdown or Impairment and of return to normal operations to the required notification list below:

REQUIRED CHECKLIST	Customer Service Desk Gables: x8-8282	RSMAES: x5-4066
Notify Fire Alarm Company	Yes _____	Other building occupants to be notified: _____
Notify Municipal Fire Department	Yes _____	Email Address _____
Notify Department Head	Yes _____	Phone _____
Notify Site Emergency Response/Fire Team	Yes _____	_____
Notify Director of Facilities Planning & Construction	Yes _____	_____
Notify Director of Facilities & Operations	Yes _____	_____
Notify Facilities/Building Manager	Yes _____	_____
Watchman surveillance in place	Yes _____	_____
Impairment Red Tags attached to impaired equipment	Yes _____	_____
Work to be continuous	Yes _____	_____
Pipe plugs/caps/etc. on hand	Yes _____	_____
Emergency connection planned	Yes _____	_____
Welding, cutting, other hot work discontinued*	Yes _____	_____
* Unless hot work is part of repairs to impaired FPS	Yes _____	_____
Cease hazardous operations	Yes _____	_____
No smoking	Yes _____	_____

**** CALL / EMAIL a copy to the following departments ****

Risk Management: riskmanagement@miami.edu / flopez@miami.edu
 AIG Insurance: GlobalProperty.Impairment@AIG.Com / Toll Free: 1-877-705-7287
F&OP: FireandLifeSafety@miami.edu / c.daley@miami.edu
 Shutdown/Impairment # -
FWC: facilities@miami.edu
 Fire Department:
 • Coral Gables Campus: fireprevention@coralgables.com
 • RSMAES & C-Stars Campuses: mdfrfgeneral@miamidade.com
UMPD Non-Emergency: 305-284-6666