

General Information			
Purpose of Shutdown (tick one)	☐ Project	☐ Planned Maintenance	☐ Emergency
Description of Works			
Project ID/Work Request No.:			
Building Code & Name:			
Natural Gas Meter Location and supply pressure			
Date of shutdown	Start date:	End date:	
	Start time:	End time:	
Head Contractor's Supervisor	Name:	Company:	
	Mobile:	Email:	
Sub Contractor's Supervisor	Name:	Company:	
	Mobile:	Email:	

#### Notes on use:

- This form shall be used where a complete or partial shutdown/ termination is required of a natural gas supply.
- If any excavation is required as part of this isolation, a permit to dig form must be obtained via the University's contractor page <a href="https://www.sydney.edu.au/about-us/working-with-the-university/contractors.html">https://www.sydney.edu.au/about-us/working-with-the-university/contractors.html</a>
- This form shall not in any way negate the responsibilities of the head contractor or the licenced plumber undertaking the works.
- This form shall be completed and signed by the relevant UI/COS Project Manager. Where a "No" is recorded, corrective actions shall be determined, and information shall be requested from all responsible parties in the checklist. All items shall be ticked as "Y" or "NA" when moving forward or as completion.
- COS Facilities Manager shall be acting as COS Project Manager for any maintenance or correction work request.
- This completed document shall be filed in the project folder or attached to the relevant Work Request.
- Where there are multiple natural gas supplies, a list of affected buildings and equipment shall be attached.

Checklist	
A notification for interruption is submitted at least ten working days (subject to the extent of interruption) before the commencement of the interruption.	☐ Yes ☐ No ☐ NA
Obtain existing USYD and Authority Services diagrams and update existing service maps with information about the construction area and potential impacts on nearby services. Conduct services survey to identify live services within the vicinity of any excavation works.	☐ Yes ☐ No ☐ NA
Identify if any works are to be carried out on or near a 1050kPa natural gas main and contact supply authority (eg. Jemena) to arrange a spotter prior to starting any works as required.	☐ Yes ☐ No ☐ NA



Checklist				
Evaluate potential risks associated with service termination, including service disruption, safety hazards, and environmental impacts. Develop risk mitigation strategies and emergency response plans.	☐ Yes ☐ No ☐ NA			
All COS Tech FMs and UI Engineers are notified, and all affected services and centralised plant/system is identified.				
It shall include but not limited to the following:				
Hydraulic Services (Hot Water supplies, Boilers, gas guard, other lab uses)				
Mechanical services (eg. Boilers, heat exchangers, Gas interlock and Shutdown)				
Fire Services (services affected by Gas guard/ Interlocks)				
Electrical Services	□ NA			
• BMCS				
• AUMS				
ICT (network operation email alias ict-cns@sydney.edu.au)				
Security and access control system				
All stakeholder consultation is completed and all critical equipment which requires temporary supply is identified and agreed by all COS Facilities Managers, UI Stakeholders and other relevant stakeholders.	☐ Yes ☐ No ☐ NA			
Construction Notifications are communicated to all relevant stakeholders.	☐ Yes ☐ No ☐ NA			
Run Sheet is provided to all relevant parties with contacts (eg. project contractor, UI/COS project manager, COS Facilities Managers, faculty representatives, etc.) during natural gas shutdown. For building or multiple buildings shutdown this shall include a contingency plan				
All relevant stakeholders as watchers are notified to be present prior to natural gas resumption to make sure natural gas to all field equipment has resumed, is operational and has no issues	☐ Yes ☐ No ☐ NA			
All relevant services maintenance contractors are engaged as watchers by Work Requests to be present prior to natural gas resumption to attend and confirm operation, and re-light pilot lights as required and confirm no issues				
ATTACHED DOCUMENTS				
The following documents must be submitted with this Procedure Checklist.				
WARNING: The checklist will not be processed without these documents being attached.				
Photos of natural gas meter and origination of the supply (single line diagram or photos of upstream meter)				
Number buildings affected and duration of outage is provided.				
Methodology for terminating/ isolating services as part of these works including any temporary provisions.				
Risk assessments, Safe work Method Statements (SWMS) and Safety Management Plans addressing any potential hazards.				



Checklist							
If required -	- Confirmat	ion letter on date	of sh	utdown from su	pply authoritie	es (eg. Jemena/ AGL)	
		uilding or multiple supplies and esse					
Shutdown R	un Sheet wi	th contacts during	g natu	ral gas shutdow	/n		
CONTRACT	OR ACKN	OWLEDGEMENT	AND	AUTHORISATI	ON		
and site con are respons the safety o	trols requir ible and lia of all persor	ed for the shutdo able to ensure all as and any assets	wn. Th hazaı affec	ne Head Contro rds are identific tted by the wor	actor and all So ed adequately ks.	not intended to ident ub Contractors workin eliminated or controll	g on shutdown led to protect
attachments	indicated i sures to be	n this checklist. Pe implemented and	ersons	working under	this checklist h	ance with all conditions ave been instructed a se control measures ide	bout site
Company	Name		Title		Signature		Date
Sub Contractor				Supervisor/ ect Manager			
Principal Contractor				Supervisor/ ect Manager			
		or must submit t uent sections and			Iniversity of S	ydney Project Manag	jer for
UNIVERSITY AUTHORISATION							
Project Mar	nager check	and review					
adequate R	isk Analysis		s have	e been incorpoi	ated and all r	ssion for completeness equired information h	
Company Project Manage		er Name		Signature	Date		
Internal sta	keholder re	eview					
The information contained on this Checklist has been reviewed and assessed by the following persons with regards to the area of responsibility indicated. Project Manager shall review and define the responsible internal stakeholders as required.							
Area of Responsibil	lity	Name		Title		Signature	Date
UI Hydraulio Services	c/Fire						



Checklist						
UI Electrical Services						
UI Mechanical Services						
ICT Communications						
COS Hydraulic Tech FM						
WHS – COS/ UI						
COS Facility Manager						
COS Protective Services						
Project manager recommendation						
The assigned University Project Manager has assessed the internal stakeholder review of the contractor's documents attached to this Checklist. Authorisation of the Checklist is recommended.						
Company	Project Manager Name	Signature	Date			
Director UI Authorisation (UI Managed Projects)						
The natural gas shutdown/ termination for this project is authorised to commence. All works must be performed in accordance with the information supplied on this permit.						
Name	Title	Signature	Date			
Scott Biggs	Director, Infrastructure Delivery, UI					
Director COS Authorisation (COS Managed Projects)						
The natural gas shutdown/ termination for this project is authorised to commence. All works must be performed in accordance with the information supplied on this permit.						
Name	Title	Signature	Date			
Sonja Skelton	Director, Asset Management & Operation					



### Checklist

- After construction, verify that all terminated services have been properly reconnected as per specifications.
- Review and archive all documentation related to service termination, risk assessment, and permit implementation for future reference.
- Conduct a post-project review to identify any issues or challenges faced during the service termination process and propose improvements for future projects.

### **WARNING!**

Site work must be suspended immediately and site made safe if persons are injured or if assets are damaged and the incident immediately reported to the University Project Manager.

A copy of this Checklist must be kept by Head Contractor on site.