

Start-Up Request Form

Date:	Project Manager:
Job Name:	Person Requesting Start-Up:
UMI Job #:	Job Site Contact (GC & UMI Super):
Address:	Requested Date (We request 5 Business days advance notice)
Cost Codes (Labor & Material) :	Labor Hours Budgeted:

List Equipment to be Started:

Check List Items:

YES / NO

Drawings Provided to Special Projects:		
Submittals to Special Projects:		
Permanent electrical equipment connections complete and verified: BY:		
Life Safety System Operational: *If no, develop a plan with the Project Manager		
Verify Breaker Location:		
Building Condition Ready For Start-Up / PM Startup Letter Issued:		
Temporary Filters in place:		

Controls Contractor Name / Contact Information:		
Piping Complete Including Condensate Lines:		
Air Distribution Complete and/or Open:		
Is Special Projects Responsible for Final Filters:		
Insulation Complete:		

Notes or Exceptions: