

# NU-1

# METHOD OPERATING PROCEDURE

UMOP Number and Title					
Location	<b>Technological Institute, Northwestern University, Evanston, IL</b>				
Duration		Start Date		End Date	
Revision		MOP Date:			
Scope Description					
Work Areas and/or Buildings					
Electrical Equipment Information	•				

<b>Impact of UMOP on Critical Facility</b>					
<b>Electrical or System</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Diagrams/Sketches</b>	<b>Comments/Notes</b>
<i>Electrical Utility Equipment</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Emergency Generator System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Critical Cooling System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Ventilation System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Critical Ventilation System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>UPS System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Critical Power Distribution System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>EPO System</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<i>Fire Detection System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Fire Suppression System (Chemical)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<i>Fire Sprinkler System (Wet)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<i>SCADA Monitoring System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Control System (DDC)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Security System</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<i>General Power and Lighting System</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>Fuel Systems</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<i>IT Equipment</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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References	
Requirements / Notifications	
Safety Requirements	
Safety Risks	
Building Risks	

	Responsible Party									
	EC	NU PM	ComED	EV DDC	EV ENG	EV ELEC	EV Lock	NU IT	ELEV PM	
<b>Preliminary Procedure (Day Prior): 3/9/17</b>										
1.										
2.										
3.										
4.										
5.										

	Estimated Duration	Drawing	Responsible Party									
			EC	NU PM	ComED	EV DDC	EV ENG	EV ELEC	EV Lock	NU IT	ELEV PM	
<b>Procedure: 3/10/17</b>												
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												
11.												
12.												
13.												
14.												

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Back Out Procedure	<p><b>In the event of utility power loss:</b></p> <ol style="list-style-type: none"> <li><b>1. Stop procedure immediately. Notify NU Technician.</b></li> <li><b>2. Safe all areas and determine cause of outage.</b></li> <li><b>3. Safe off all non-terminated cables.</b></li> <li><b>4. Note last step completed when power went out.</b></li> </ol> <p><b>In the event of an OSHA recordable injury:</b></p> <ol style="list-style-type: none"> <li><b>5. Call 911.</b></li> <li><b>6. Investigate and document required OSHA Injury and Illness information.</b></li> <li><b>7. Finish procedure at last step completed when utility power is available.</b></li> </ol> <p><b>If nomenclature and tags does not match equipment identification, stop procedure.</b></p>		
Acknowledgement of MOP	Name	Title	Date
		Contractor Foreman (EC)	
		NU Project Manager (NU PM)	
		NU Technician – Electrical (EV ELEC)	
		NU Technician – NUIT (NU IT)	
		NU Technician – HVAC (EV DDC/ENGR)	
		NU Technician – Plumbing (EV PLBG)	
Notes and Comments		NU Technician – Lock Shop (EV LOCK)	
		NU Technician – Elevator (ELEV PM)	
	<p>This operating procedure, as defined above, has been completed and verified by the Owner’s Designated Authority and is accepted with the exceptions noted in the Notes and Comments section.</p>		
Name	Signature	Date	