



UBC Energy and Water Services
 6130 Agronomy Road, Vancouver, BC V6T 1Z3
 Tel: (604) 822-9445 Email: Utilities.clerk@ubc.ca

DES SERVICE ACTIVATION REQUEST

Part 1. INSTRUCTIONS

- Operation of all UBC Energy and Water Services (EWS) valves is to be performed by UBC EWS staff only.
- Written Activation Request must be submitted to UBC EWS 48 hours in advance of requested activation date.
- All service valves must be located and made accessible by contractor.
- UBC EWS is not responsible for any part of the installation beyond the demarcation point of service.
- **Submit DES Activation Request to UBC EWS:**
 DES Process Specialist, Kevin Phelan Kevin.Phelan@ubc.ca

Part 2. REQUESTOR INFORMATION

Project Name: _____ Contractor or UBC Dept.: _____

Project Address/ Building Name: _____ Date: _____

Type of Service (check one): DISTRICT ENERGY PIPING ENERGY TRANSFER STATION

Requestor Name: _____ Title: _____ Requestor Phone #: _____

Signature of Requestor: _____

Site Contact Name: _____ Site Contact Phone #: _____

Size of Service: _____ Location of Service: _____

Date and Time of Requested Activation: _____

FOR ALL ACTIVATION INSPECTIONS: RELEVANT SECTION OF DES CONSTRUCTION CHECKLIST MUST BE COMPLETED AND ATTACHED TO APPLICATION

DISTRICT ENERGY SYSTEM (DES):

Temporary DES supply Permanent DES supply

Meter & Calculator operational and (if applicable) reporting remotely: YES NO N/A

ATTACHED: Hydrostatic Test Results Flushing report X-ray and visual reports
 TSBC CDR or Repair & Alteration report signed by EOR DES Construction Checklist

Boiler Safety Authority Registration Number: _____ TSBC Permit Number: _____

Required for all activation purposes:

Engineer of Record (name & signature): _____

Company Name: _____ Date: _____

EOR to ensure: all required inspections have been completed, the service is safe to activate, and to the best of the Engineer's knowledge and belief, the Contractor has constructed the piping in accordance with all applicable codes. All changes to District Energy Systems must be signed off by the EOR

Part 3. UBC EWS Office Use Only

Date Request Received: _____ W.O. No: _____

Received By: _____ Authorized by: _____

Activated By: _____ Date Activated: _____

Comments: _____