UNIVERSITY OF NOTRE DAME
UTILITIES & MAINTENANCE DEPARTMENT

PIPE CLEANING REQUEST FORM

In order to ensure successful and comprehensive cleaning of building piping systems the following form must be completed and returned to the University of Notre Dame Utilities Department in order to initiate scheduling of the piping system cleaning. This form must be submitted a minimum of four weeks prior to the requested cleaning date to the Notre Dame Utilities Department.

Failure to provide this completed request may result in project schedule delays. **Piping systems are NOT to be filled prior to approval of this request form.** Failure to properly complete this form and follow the Check List may result in damage to the piping systems as well as other property damage. The contractor hereby knowingly and voluntarily assumes all risk of injury, property damage and liability for any and all costs associated with any service interruption and restoration, as well as for any claims, demands, actions, causes of actions, damages or judgments arising out of personal injuries or property damage resulting from the system use.

**Party Requesting Cleaning:**
Company Name:
Contact Person:
Telephone No.:
Date of Request:

**Project Information:**
Project Name:
Project Location:

**Requested System Information:**
Type of piping system cleaning: Steam ____________________________ Condensate ____________________________
Heating ____________________________ Chilled Water ____________________________
Auxiliary Chilled Water ____________________________ Heat Recovery Water ____________________________
Other (Specify) ____________________________

Indicate full or partial system cleaning: Full Partial ____________________________
If partial, reason for only partial: ____________________________
Date after which piping system will be ready to perform cleaning: ____________________________

**Other Information:**


**Contractor Sign-off:**
We the following contractors do certify that all work will be complete by the requested date for the above mentioned piping systems. Such work shall include all necessary electrical work for pumps, mechanical piping, side stream filters, controls, fan/pump equipment etc. that is necessary to fully circulate water throughout the aforementioned piping systems. Complete checklist attached.

Further, we represent and warrant that we understand how to operate the entire system in its current condition that the components thereof.

General Contractor: ____________________________
Electrical Contractor: ____________________________
Mechanical Contractor: ____________________________
Sheetmetal Contractor: ____________________________
Temperature Control Contr.: ____________________________

**Piping Cleaning Schedule Information: (Completed by UND Utilities)**
Cleaning Scheduled to Begin on Following Date: ____________________________
Number of Days Scheduled On Site: ____________________________
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PIPE CLEANING CHECK LIST

Project: ___________________________ Date: ___________________________

Date Requested to begin cleaning: ______________ System Volume: ______________

Steam System: __________________________ System Volume: ______________

Piping Materials: Steel __________________________ %
                Copper __________________________ %
                Galvanized __________________________ %
                Aluminum __________________________ %
                Other (Specify) __________________________ %

Special Considerations (Specify): ____________________________________________

Systems Components:
    Pump VFD commissioning date: __________________________________________
    Side Stream Filter/Feeder Installed: ______________________________________
    Side Stream Filter Bags Installed: ______________________________________
    Manual Valves in open position: ______________________________________
    Automatic controls operational: ______________________________________
    Strainers installed: __________________________________________
    Make-up Water Source: __________________________________________
    Make-up and Drain Connections Available: __________________________

Other Components:
    Provided Description of application and use: __________________________

Condensate System: __________________________ System Volume: ______________

Piping Materials: Steel __________________________ %
                Copper __________________________ %
                Galvanized __________________________ %
                Aluminum __________________________ %
                Other (Specify) __________________________ %

Special Considerations (Specify): ____________________________________________

Systems Components:
    Pump VFD commissioning date: __________________________________________
    Side Stream Filter/Feeder Installed: ______________________________________
    Side Stream Filter Bags Installed: ______________________________________
    Manual Valves in open position: ______________________________________
    Automatic controls operational: ______________________________________
    Strainers installed: __________________________________________
    Make-up Water Source: __________________________________________
    Make-up and Drain Connections Available: __________________________

Other Components:
    Provided Description of application and use: __________________________

Contractor: __________________________________________
Representative: __________________________________________
Contact Information: __________________________________________
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PIPE CLEANING CHECK LIST

Project: ____________________________ Date: ____________________________

Date Requested to begin cleaning: ____________________________

Heating System: _____________ System Volume: ____________________________

Piping Materials: Steel _________ %
Copper ___________ %
Galvanized _________ %
Aluminum __________ %
Other (Specify) _________ %

Special Considerations (Specify): ____________________________________________________________________________

Systems Components:
Pump VFD commissioning date: ____________________________
Side Stream Filter/Feeder Installed: ____________________________
Side Stream Filter Bags Installed: ____________________________
Manual Valves in open position: ____________________________
Automatic controls operational: ____________________________
Strainers installed: ____________________________
Make-up Water Source: ____________________________
Make-up and Drain Connections Available: ____________________________

Other Components:
Provided Description of application and use: ____________________________

Chilled Water System: _____________ System Volume: ____________________________

Piping Materials: Steel _________ %
Copper ___________ %
Galvanized _________ %
Aluminum __________ %
Other (Specify) _________ %

Special Considerations (Specify): ____________________________________________________________________________

Systems Components:
Pump VFD commissioning date: ____________________________
Side Stream Filter/Feeder Installed: ____________________________
Side Stream Filter Bags Installed: ____________________________
Manual Valves in open position: ____________________________
Automatic controls operational: ____________________________
Strainers installed: ____________________________
Make-up Water Source: ____________________________
Make-up and Drain Connections Available: ____________________________

Other Components:
Provided Description of application and use: ____________________________

Contractor: ____________________________
Representative: ____________________________
Contact Information: ____________________________
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PIPE CLEANING CHECK LIST

Project: _______________________________ Date: _______________________________

Date Requested to begin cleaning: ________________

Auxiliary Chilled Water System: ________________ System Volume: ________________

Piping Materials:
- Steel ____________________
- Copper __________________
- Galvanized ______________
- Aluminum ________________
- Other (Specify) __________

Special Considerations:
- Glycol __________________
- Other (Specify) __________

Systems Components:
- Pump VFD commissioning date: ________________________________
- Side Stream Filter/Feeder Installed: _____________________________
- Side Stream Filter Bags Installed: _____________________________
- Manual Valves in open position: ________________________________
- Automatic controls operational: ________________________________
- Strainers installed: ________________________________
- Make-up Water Source: ________________________________
- Make-up and Drain Connections Available: ____________________

Other Components:
- Provided Description of application and use: __________________

Heat Recovery Water System: ________________ System Volume: ________________

Piping Materials:
- Steel ____________________
- Copper __________________
- Galvanized ______________
- Aluminum ________________
- Other (Specify) __________

Special Considerations:
- Glycol __________________
- Other (Specify) __________

Systems Components:
- Pump VFD commissioning date: ________________________________
- Side Stream Filter/Feeder Installed: _____________________________
- Side Stream Filter Bags Installed: _____________________________
- Manual Valves in open position: ________________________________
- Automatic controls operational: ________________________________
- Strainers installed: ________________________________
- Make-up Water Source: ________________________________
- Make-up and Drain Connections Available: ____________________

Other Components:
- Provided Description of application and use: __________________

Contractor: ________________________________
Representative: ________________________________
Contact Information: ________________________________
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PIPE CLEANING CHECK LIST

Project: ___________________________ Date: ___________________________

Date Requested to begin cleaning: ___________________________
Other Water System (Specify): ___________________________ System Volume: ___________________________

Piping Materials: 
- Steel ___________________________ %
- Copper ___________________________ %
- Galvanized ___________________________ %
- Aluminum ___________________________ %
- Other (Specify) ___________________________ %

Special Considerations: 
- Glycol ___________________________
- Other (Specify) ___________________________

Systems Components:
- Pump VFD commissioning date: ___________________________
- Side Stream Filter/Feeder Installed: ___________________________
- Side Stream Filter Bags Installed: ___________________________
- Manual Valves in open position: ___________________________
- Automatic controls operational: ___________________________
- Strainers installed: ___________________________
- Make-up Water Source: ___________________________
- Make-up and Drain Connections Available: ___________________________

Other Components: 
- Provided Description of application and use: ___________________________

__________________________________________

Contractor: ___________________________
Representative: ___________________________
Contact Information: ___________________________