

Outage Request Form

V1.4 (Updated 2/6/12)



Request Date: _____

Type Of Outage Requested:	_____
	Hold Off
	Hot Line Energized
	Hot Line De-Energized
	Move / Remove Grounds

Element Needed Out Of Service: _____

Substation(s): _____

Work Start Date:	Work End Date:
Work Start Time:	Work End Time:
Requestor:	Phone #:
Responsible Person:	Phone #:
Clearance Holder :	Phone #:

Work To Be Done: _____

Commissioning Needed: Yes No

Requested Clearance Points: _____

Grounding Requirements: _____

Alt Work Request #:	MGE Switching I/O#:
Alt Project ID #:	MGE Account #:
WPS Switching I/O#:	WE Switching I/O#:
WPS Account #:	WE Account #

Additional Info: _____

FOR ATC SOC USE

MISO Crow Number:	Date Submitted:
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Notes: _____