

WATER SHUT-OFF INFORMATION

TODAY'S DATE: _____

REQUESTOR'S NAME &
TELEPHONE NUMBER:

☐ Owner ☐ Agent ☐ Tenant

PLUMBER'S NAME/COMPANY &
TELEPHONE NUMBER:

PLUMBER LICENSE No.: _____

APT #: _____ TOWER: _____

AREA (BATHROOM OR KITCHEN): _____

- Bathroom & Kitchen shut-offs must be on separate days UNLESS the stacks are together.
- One plumbing job per day UNLESS (1) both jobs use the same stacks, AND (2) the same plumber works both jobs, AND (3) the maintenance supervisor approves both jobs in advance.

DESCRIPTION OF WORK:

DATE OF WATER SHUT-OFF: _____ TIME: 9 a.m. – 2 p.m.
(Tuesday, Wednesday, Thursday)

NOTE:

- ☐ **Plumber must check-in with Security before shut-off** to allow time for the water to drain; Maintenance will not shut-off water until plumber is here.
- ☐ **All work must conform to standards** outlined in the *Waikiki Banyan Plumbing Replacement Part Standards* information sheet.
- ☐ **There will be a \$200 NON-REFUNDABLE booking fee due immediately. You will be able to AMEND schedule once, up to 7 days prior to WSO date, subject to availability.**

_____ (initial for acknowledgement)

(OFFICE USE)

STACKS AFFECTED: _____

COPY OF LIABILITY: _____