

Method of Procedure

The following form must be completed for any vendor/contractor or employee performing work.

Section 1: General Information			
Vendor / Contractor Company Name (if applicable):	Work Start Date:	Start Time (AM / PM):	
	Work End Date:	End Time (AM / PM):	
Vendor / Contractor / Employee Names: Please provide the individual names of all vendor / contractor or data center staff who will be involved in the work.			

Listed below are individual names and emergency contact phone numbers.			
Contact Name	Role	Office Phone Number	Pager / Emergency Phone Number

Maintenance or Repair Description:			

Section 2: MOP Documentation

List all supporting documentation, such as schematics, checklists, etc.

1. As-built drawings
2. Equipment technical specifications.
3. Material Safety Data Sheets (MSDS)

Section 3: MOP Risks and Assumptions

Assess the following to address risk of unplanned downtime. If the answer is "Yes" to any of these questions, verify that the work may proceed.

1. Will the work affect the functioning of the data center?
2. At the time the work is being conducted, are there environmental conditions present that may increase the risk of outage (e.g. thunderstorm)?
3. At the time the work is being conducted, are there production considerations that require delaying the work?

Section 4: Procedure

Provide a detailed step-by-step description of the work, including estimated time required for each activity.

* To add additional rows, click "Tab" from the last cell in the last row.

#	Time (Estimated)	Description	Initials
1	--	Approval of MOP Description & Tasks [see Section 6]	
2	--	Approval to proceed with MOP Content [see Section 6]	
3		Change process completed	
4	5 minutes	Verify that you have the appropriate safety gear and proper key to access MDF	
5	5 minutes	Review Section 3, take appropriate action if the answer to any question is "Yes"	
6	minutes	Proceed to location of work	
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Section 5: Emergency Back-out Procedure

Provide a detailed description of the procedure for backing out any changes.

* To add additional rows, click "Tab" from the last cell in the last row.

#	Time (Estimated)	Description	Initials
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Section 6: Contacts and Approvals**Author of MOP:**
Name: _____
Email: _____
Tel. #: _____
MOP Point of Contact:
Name: _____
Email: _____
Cell #: _____
Approval of MOP Description & Tasks:
Name: _____
Title: _____
Date: _____
Approval to Proceed with MOP:
Name: _____
Title: _____
Date: _____