



Shutdown/Turnaround Checklist

 Show only Checklist

Display Style
Default 

Planning & Preparation

Activities related to planning, risk assessment, permit acquisition, and communication prior to the shutdown.

Planned Shutdown Start Date

Enter date...

Planned Shutdown End Date

Enter date...



Estimated Shutdown Duration (Days)

Enter a number...

Shutdown Scope Description

Write something...

Affected Areas/Units

- ☐ Area A
- ☐ Area B
- ☐ Unit 1
- ☐ Unit 2

Shutdown Type

- ☐ Preventative Maintenance
- ☐ Corrective Maintenance
- ☐ Capital Upgrade
- ☐ Emergency Shutdown

Risk Assessment Document

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Permit Required (Yes/No)

Write something...

Personnel & Safety

Ensuring adequate staffing, safety protocols, and emergency preparedness for the shutdown.

Number of Personnel Involved

PPE Requirements (Select all that apply)

- ☐ Hard Hat
- ☐ Safety Glasses
- ☐ Gloves
- ☐ Safety Shoes
- ☐ Respirator
- ☐ Hearing Protection
- ☐ High-Visibility Vest

Briefing/Toolbox Talk Topics Covered

Date of Safety Briefing

Time of Safety Briefing

Enter time...

Emergency Contact Person(s)

☐ Contact 1

☐ Contact 2

☐ Contact 3

Emergency Procedures Reviewed (Fire, Medical, Spill)

Write something...

Attach Relevant Safety Documentation (SDS, Permit to Work)

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Safety Supervisor Sign-off

Utilities & Services

Steps required to isolate, depressurize, and secure utilities like electricity, water, steam, and compressed air.

Main Power Supply Voltage (V)

Enter a number...

Steam Supply Isolation Method

- ☐ Blind Flange
- ☐ Valve Isolation
- ☐ Other (Specify)

Detailed Notes on Steam Isolation Procedure

Write something...

Scheduled Time for Water Supply Isolation

Enter time...

Compressed Air Line Isolation

- ☐ Complete Isolation
- ☐ Partial Isolation (Specify)

Description of Partial Compressed Air Isolation

Write something...

Date of Last Utility System Inspection

Enter date...

Water Tank Level (%), prior to shutdown

Enter a number...

Nitrogen Purge Required?

☐ Yes

☐ No

Equipment Isolation & Lockout/Tagout (LOTO)

Procedures for isolating and securing equipment to prevent accidental startup.

Select Isolation Method

☐ Physical Isolation (Valves, Blinds)

☐ Lockout/Tagout (LOTO)

☐ Double Break Isolation

☐ Energy Absorbent Devices

Describe Isolation Procedures

Write something...

Lock Number (if applicable)

Enter a number...

Energy Source

- ☐ Electrical
- ☐ Pneumatic
- ☐ Hydraulic
- ☐ Steam
- ☐ Water

Affected Equipment (Check all that apply)

- ☐ Pumps
- ☐ Motors
- ☐ Valves
- ☐ Compressors
- ☐ Reactors
- ☐ Heat Exchangers

Isolation Verification Signature

Isolation Verification Date

Enter date...

Isolation Verification Time

Enter time...

Mechanical Work

Tasks related to mechanical repairs, replacements, and inspections.

Describe the specific mechanical work to be performed.

Write something...

Estimated labor hours required for mechanical work.

Enter a number...

Upload detailed mechanical work scope documents/drawings.

 Upload File

Type of Mechanical Repair (e.g., replacement, overhaul, inspection).

- ☐ Replacement
- ☐ Overhaul
- ☐ Inspection
- ☐ Repair
- ☐ Other

Estimated Start Date for Mechanical Work.

Enter date...

Estimated Start Time for Mechanical Work.

Enter time...

Specialized tools or equipment required.

- ☐ Crane
- ☐ Specialized Wrench Set
- ☐ Hydraulic Tools
- ☐ Welding Equipment
- ☐ None

Part Number(s) of replaced components.

Write something...

Mechanical Work Completion Signature

Electrical Work

Activities involving electrical equipment, including testing, repairs, and upgrades.

Voltage Readings - Phase A

Enter a number...

Voltage Readings - Phase B

Enter a number...

Voltage Readings - Phase C

Enter a number...

Insulation Resistance Test Result (Megger)

- ☐ Pass
- ☐ Fail
- ☐ Not Performed

Detailed Observations During Insulation Resistance Testing

Write something...

Electrical Safety Checks Performed

- ☐ Grounding Verification
- ☐ Overcurrent Protection
- ☐ Personnel Protective Equipment (PPE) Inspection
- ☐ Arc Flash Hazard Assessment Review

Date of Next Electrical Inspection

Enter date...

Upload Infrared Thermography Report (if applicable)

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Equipment Tag Number for Disconnect Switches

Write something...

Electrician Sign-off

Instrumentation & Control Systems

Tasks related to calibration, testing, and maintenance of instrumentation and control systems.

Calibrate Flow Meter - Loop X

Enter a number...

PLC Program Backup Status

- ☐ Completed
- ☐ In Progress
- ☐ Not Started

Record any observed deviations during calibration

Write something...

Last Calibration Date - Controller Y

Enter date...

Time of Calibration - Controller Y

Enter time...

Upload Calibration Certificates

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HMI Screen Functionality Test Result

- ☐ Pass
- ☐ Fail
- ☐ Not Tested

Loop Checks Performed

- ☐ PID Tuning
- ☐ Signal Integrity
- ☐ Input/Output Validation
- ☐ Communication Tests

Process & Cleaning

Steps for cleaning, flushing, and preparing process equipment for maintenance or inspection.

Describe the cleaning procedure to be followed. Include any specific chemicals or techniques.

Write something...

Target cleanliness level (e.g., % reduction in contaminants)

Enter a number...

Cleaning Method Selected

- ☐ Manual Cleaning
- ☐ Pressure Washing
- ☐ Chemical Cleaning (specify in LONG_TEXT)
- ☐ Other (specify in LONG_TEXT)

Upload SDS (Safety Data Sheets) for cleaning chemicals.

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Date of Last Cleaning

Enter date...

Record any unusual observations or issues encountered during cleaning.

Write something...

Waste Disposal Method

- ☐ Recycle
- ☐ Landfill
- ☐ Specialized Disposal (specify in LONG_TEXT)

Estimated Cleaning Duration

Enter time...

Post-Shutdown Activities & Restart

Procedures for post-maintenance checks, system re-integration, and controlled equipment restart.

Planned Restart Date/Time

Enter date...

Actual Restart Time

Enter time...

Pressure Readings (Confirm within spec)

Enter a number...

Temperature Readings (Confirm within spec)

Enter a number...

Checklist Verification - Restart Sequence Complete?

☐ Yes

☐ No

Confirm Safety Interlocks Functioning Correctly

☐ Yes

☐ No

Any Issues Encountered During Restart?

Write something...

Restart Verification Signature

Production Levels Restored?

☐ Yes

☐ No

Notes on initial production run

Write something...

Documentation & Sign-off

Ensuring all work is properly documented, signed off, and lessons learned are captured.

Shutdown Start Date

Enter date...

Shutdown End Date (Planned)

Enter date...

Planned Restart Time

Enter time...

Summary of Work Performed

Write something...

Total Shutdown Duration (Hours)

Enter a number...

Deviations from Planned Shutdown (Check all that apply)

- ☐ Unforeseen Repairs
- ☐ Scope Changes
- ☐ Equipment Delays
- ☐ Safety Concerns
- ☐ None

Details of Deviations (if any)

Write something...

Supporting Documentation (e.g., Inspection Reports, Photos)

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Shutdown Supervisor Sign-off