

Notice of Service Interruption/Area Closure Western University Facilities Management

Client Services 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail

Print Form

| Date of Interruption/Closure Sep 30, 2016 Time(s): 9:00am - 9:30am | | | | | | | |
|---|--|-------------------|----------------------------|---|------------------------|-----------------------|--|
| Fire alar | | | #2 #2 | ion. Lovett Electric I | has reque | sted to verify system | |
| | #TIT THE Alarm Den and Device Te | | #2 #4 | | | | |
| | erification and bell test of new device | s. | | | | | |
| Requester: Electrical Shop Date of Request: Sep 26, 2016 | | | | | | | |
| Supervi | sing Tradesperson: | | Unit: | | | | |
| Trade Manager: Doug Johnson | | | | Electrical/Mechanical Sh | Shop Date:Sep 26, 2016 | | |
| Contractor: Lovett Electric and Tyco c/o Mark H. (Lovett) | | | | Phone # +1 (519) 282-46 | 25 | | |
| Coordinator/Project Manager: | | | | Phone # Date: | | | |
| Reviewed | I by Trade Manager(s)/Shop(s) Affected: | | | | | | |
| Name: | Fire Safety | Date: Sep 26, 201 | 6 Name: | Housing | | Date: Sep 26, 2016 | |
| Signatur Stamp: | e APPROVED | 2 | Signature/ Stamp: | APPROVED By Chris Yeo (cyeo3@uwo.ca) a | tt 4:00 pm, Sep 28 | 3, 2016 | |
| Name: | Electrical Shop | Date: | Principal C | Principal Occupants: | | | |
| Signatur | e/ RECEIVED | | Name: | Name: | | Date: | |
| Stamp: | By Heather Zavitz (hzavitz@uwo.ca) at 8:48 am, Sep 27, | 2016 | Name: | Name: | | Date: | |
| Name: | | Date: | Name: | | | Date: | |
| Signature/ Stamp: | | Name: | Approval to Proceed: Date: | | | | |
| Name: | | Date: | | | | | |
| Signature/ Stamp: By Dan Trudgeon (dtrudgeo@uwo.ca) at 2:17 pm, | | | | | | | |
| | e/ | | | udgeon (dtrudgeo@uw | o.ca) at 2:1 | 7 pm, Sep 29, 2016 | |