



Western UNIVERSITY • CANADA

# Notice of Service Interruption/Area Closure Western University Facilities Management

Service Centre 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail

Print Form

Date of Interruption/Closure: <input type="text" value="Apr 29, 2014"/>	Time(s): <input type="text" value="7:00 am - 9:00 am"/>
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Building(s) Affected: #1 <input type="text" value="Dental Sciences"/>	#2 <input type="text" value="Health Sciences Addition"/>
#3 <input type="text"/>	#4 <input type="text"/>

Areas/Rooms Affected Alternate Route/Service:

Service to be interrupted: #1 <input type="text" value="Hazardous Exhaust"/>	#2 <input type="text" value="Fume hoods"/>
#3 <input type="text"/>	#4 <input type="text"/>

Description/Reason for Project:

Requester:  Date of Request:

Supervising Tradesperson:  Unit:

Trade Supervisor:  Unit:  Date:

Contractor:  Phone #:

Coordinator/Project Manager:  Phone #:  Date:

Reviewed by Trade Supervisor(s)/Shop(s) Affected:

Name: <input type="text" value="Electrical Mechanical Shop"/>	Date: <input type="text" value="Apr 15, 2014"/>	Name: <input type="text" value="WES"/>	Date: <input type="text"/>
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Signature/Stamp:	Signature/Stamp:
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Reviewed by:	Principal Occupants:
Name: <input type="text"/>	Name: <input type="text"/>
Date: <input type="text"/>	Ext.: <input type="text"/>
Signature/Stamp: <input type="text"/>	Date: <input type="text"/>
	Name: <input type="text"/>
	Ext.: <input type="text"/>
	Date: <input type="text"/>
	Name: <input type="text"/>
	Ext.: <input type="text"/>
	Date: <input type="text"/>

Approval to Proceed: Date:  Approval to Proceed: Date:

<input type="text"/>	<b>APPROVED</b> By Andrew (amerucci@uwo.ca) at 8:15 am, Apr 22, 2014
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Notes:

# HAZARDOUS EXHAUST SYSTEMS

## FAN SHUTDOWN LISTINGS

### DENTAL SCIENCE - ROOF C

DATE OF SHUT DOWN -	
OFF BY	
ON BY	

REASON FOR SHUTDOWN

ROOM NUMBER	SYSTEM NUMBER	USE	OFF	ON
2003	O40	FUME CABINET	TURN OFF AT PANEL 5P - cir.#1 NEAR RM. 4006 CORRIDOR AND INSTALL WARNING SIGN ON FUME CABINET	
2005	35		ELEPHANT TRUNKS PANEL 5P CIRCUIT # 3	
2005	36		ELEPHANT TRUNKS PANEL 5P CIRCUIT # 6	
2010B	37		DOUBLE SIDED FUME CABINET PANEL 5P CIRCUIT #14	
2011	38		FUME CABINET PANEL 5P CIRCUIT # 21	
3003	O44	DARK ROOM EXHAUST	FUME CABINET	
3003D	O42	FUME CABINET	TURN OFF AT PANEL 5P-cir.7 ON 4TH FLOOR COORIDOR NEAR 4006 AND INSTALL WARNING SIGN ON FUME CABINET	
3004	O45, O46, O47	FUME CABINET		
3005B	O49	FUME CABINET		
3006B	O52	FUME CABINET		
4010	O78	FUME CABINET		
4011	O62	FUME CABINET		
4012	O63	EQUIPMENT EXHAUST		
4014	O64	HOOD		
4015	O65	FUME CABINET		

2 SIGNS REQUIRED

# HAZARDOUS EXHAUST SYSTEMS

## FAN SHUTDOWN LISTINGS

### HEALTH SCIENCE ADDITION - ROOFS C,E

DATE OF SHUT DOWN -	
OFF BY	
ON BY	

REASON FOR SHUTDOWN
<b>ANNUAL HAZARDOUS ROOF SHUTDOWNS</b>

ROOM NUMBER	SYSTEM NUMBER	USE	CONTACTS
202	OO2	FUME CABINET	
216	OO3	FUME CABINET	
301 F	OO6	FUME CABINET	
406	O12	FUME CABINET	
408	OO7	FUME CABINET	
415	O13	FUME CABINET	
418	OO8, OO9	FUME CABINETS	