



**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: <input type="text" value="Nov 10, 2016"/>	Time(s): <input type="text" value="7:00 A.M. - 8:00 A.M."/>
---	---

Building(s) Affected: #1 <input type="text" value="HEALTH SCIENCES BUILDING (HSB)"/>	#2 <input type="text"/>
#3 <input type="text"/>	#4 <input type="text"/>

Areas/Rooms Affected Alternate Route/Service:  
**Annual Fire Alarm Bell Test.**  
 During the test bells will sound but there is no need to leave the building. However, treat all fire alarms outside of these times as **REAL** and **EVACUATE THE BUILDING**. All rooms must be entered to verify that the signalling device function properly.

Service to be interrupted: #1 <input type="text" value="FIRE ALARM BELL TEST"/>	#2 <input type="text"/>
#3 <input type="text"/>	#4 <input type="text"/>

Description/Reason for Project:

Requester: <input type="text" value="Fire Safety"/>	Date of Request: <input type="text" value="OCTOBER 18, 2016"/>
---	--

Supervising Tradesperson: <input type="text"/>	Unit: <input type="text"/>
Trade Manager: <input type="text"/>	Unit: <input type="text"/> Date: <input type="text"/>

Contractor: <input type="text" value="ANDERSON'S ELECTRONICS"/>	Phone # <input type="text" value="+1 (519) 657-2063"/>
Coordinator/Project Manager: <input type="text" value="Frank Faroni"/>	Phone # <input type="text" value="+1 (519) 808-5916"/> Date: <input type="text"/>

Reviewed by Trade Manager(s)/Shop(s) Affected:			
Name: <input type="text" value="Fire Safety"/>	Date: <input type="text"/>	Name: <input type="text"/>	
Signature/Stamp:		Signature/Stamp: <input style="width:100%; height:30px;" type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>	<b>Principal Occupants:</b>	
Signature/Stamp: <input style="width:100%; height:30px;" type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>
Signature/Stamp: <input style="width:100%; height:30px;" type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>
Signature/Stamp: <input style="width:100%; height:30px;" type="text"/>		Approval to Proceed: <input type="text"/> Date: <input type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>	<div style="border: 2px solid green; padding: 5px; display: inline-block;"> <p style="margin:0;"><b>APPROVED</b></p> <p style="margin:0;"><i>By Dan Trudgeon at 1:48 pm, Nov 08, 2016</i></p> </div>	
Signature/Stamp: <input style="width:100%; height:30px;" type="text"/>			

Notes: