



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="July 30 2018"/>	Time(s): <input type="text" value="1:00PM - 4:00PM"/>
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Building(s) Affected: #1 #2
 #3 #4

Areas/Rooms Affected Alternate Route/Service:
 All rooms must be entered to verify that the signaling bell device functions properly. The bells will sound during the test but there is no need to leave the building. However, treat all fire alarms outside of these times as REAL and EVACUATE the building.

Service to be interrupted: #1 #2
 #3 #4

Description/Reason for Project:
 Annual Fire Alarm Bell Test.

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="Fire Safety"/> Date: <input type="text" value="Jun 12, 2018"/> Signature/Stamp: 	Name: <input type="text" value="Housing"/> Date: <input type="text" value="Jun 12, 2018"/> Signature/Stamp: 												
Name: <input type="text"/> Date: <input type="text"/> Signature/Stamp: <input type="text"/>	Principal Occupants: <table border="1" style="width:100%"> <tr><td>Name:</td><td>Ext.</td><td>Date:</td></tr> <tr><td>Name:</td><td>Ext.</td><td>Date:</td></tr> <tr><td>Name:</td><td>Ext.</td><td>Date:</td></tr> <tr><td>Name:</td><td>Ext.</td><td>Date:</td></tr> </table>	Name:	Ext.	Date:	Name:	Ext.	Date:	Name:	Ext.	Date:	Name:	Ext.	Date:
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Name: <input type="text"/> Date: <input type="text"/> Signature/Stamp: <input type="text"/>	Approval to Proceed: <input type="text"/> Date: <input type="text"/>  By Dara Gomez (dgomez5@uwo.ca) at 11:47 am, Jun 15, 2018												

Notes: