



Notice of Service Interruption/Area Closure
The University of Western Ontario
Physical Plant & Capital Planning Services
Service Centre 519-661-3304 (ppdhelp@uwo.ca)

[Submit by Email](#)

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Date of Interruption/Closure: <input type="text" value="May 8, 2014"/>	Time(s): <input type="text" value="2:00 P.M. - 3:00 P.M."/>
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Building(s) Affected:	#1 <input type="text" value="Medway Hall"/>	#2 <input type="text"/>	#3 <input type="text"/>	#4 <input type="text"/>
Areas/Rooms Affected	<input type="text" value="Entire Building"/>			
Alternate Route/Service:	<input type="text"/>			

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:	<input type="text" value="Annual Fire Alarm Bell Test. During the test the 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 devices function properly."/>			

Requester: <input type="text" value="Frank Faroni"/>	Date of Request: <input type="text" value="Apr 29, 2014"/>
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Supervising Tradesperson: <input type="text"/>	Unit: <input type="text"/>
Trade Supervisor: <input type="text"/>	Unit: <input type="text"/> Date: <input type="text"/>

Contractor: <input type="text"/>	Phone #: <input type="text"/>
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 Supervisor(s)/Shop(s) Affected:			
Name: <input type="text" value="Fire Safety"/>	Date: <input type="text"/>	Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: 	Signature/Stamp: <div style="border: 1px solid green; padding: 5px; display: inline-block;">APPROVED <i>By Val (vjdukesh@uwo.ca) at 8:46 am, May 01, 2014</i></div>		

Reviewed by:	Principal Occupants:
Name: <input type="text"/>	Name: <input type="text"/> Ext. <input type="text"/> Date: <input type="text"/>
Date: <input type="text"/>	Name: <input type="text"/> Ext. <input type="text"/> Date: <input type="text"/>
Signature/Stamp: <div style="border: 1px solid green; padding: 5px; display: inline-block;">APPROVED <i>By Jerry Minler (gmminler@uwo.ca) at 9:13 am, May 01, 2014</i></div>	Name: <input type="text"/> Ext. <input type="text"/> Date: <input type="text"/>
	Name: <input type="text"/> Ext. <input type="text"/> Date: <input type="text"/>

Service Centre Representative: <input type="text"/>	Date: <input type="text"/>	Approval to Proceed: <input type="text"/>	Date: <input type="text"/>
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APPROVED <i>By Andrew (amerucci@uwo.ca) at 8:14 am, May 02, 2014</i>	
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Notes:	<input style="height: 80px;" type="text"/>
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