



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

Print Form

Date of Interruption/Closure <input style="width: 150px;" type="text" value="January 20 to 27, 2014"/>		Time(s): <input style="width: 150px;" type="text" value="8:00 A.M. - 5:00 P.M."/>	
<div style="display: flex; justify-content: space-between;"><div>Building(s) Affected: #1 <input style="width: 150px;" type="text" value="Natural Sciences"/></div><div>#2 <input style="width: 150px;" type="text"/></div><div>#3 <input style="width: 150px;" type="text"/></div><div>#4 <input style="width: 150px;" type="text"/></div></div>			
Areas/Rooms Affected		<input style="width: 100%;" type="text" value="Entire Building"/>	
Alternate Route/Service: <input style="width: 100%;" type="text"/>			
<div style="display: flex; justify-content: space-between;"><div>Service to be interrupted: #1 <input style="width: 150px;" type="text" value="Fire Alarm Device Test"/></div><div>#2 <input style="width: 150px;" type="text"/></div><div>#3 <input style="width: 150px;" type="text"/></div><div>#4 <input style="width: 150px;" type="text"/></div></div>			
Description/ Reason for Project:		<input style="width: 100%;" type="text" value="Annual Fire Alarm Device Test. Individual devices will be tested throughout the building. All rooms will be entered to perform testing."/>	
Requester: <input style="width: 150px;" type="text" value="Frank Faroni"/>		Date of Request: <input style="width: 100px;" type="text" value="Jan 14, 2014"/>	
Supervising Tradesperson: <input style="width: 150px;" type="text"/>		Unit: <input style="width: 150px;" type="text"/>	
Trade Supervisor: <input style="width: 150px;" type="text"/>		Unit: <input style="width: 100px;" type="text"/> Date: <input style="width: 100px;" type="text"/>	
Contractor: <input style="width: 150px;" type="text"/>		Phone # <input style="width: 100px;" type="text"/>	
Coordinator/Project Manager: <input style="width: 150px;" type="text" value="Frank Faroni"/>		Phone # <input style="width: 100px;" type="text" value="+1 (519) 808-5916"/> Date: <input style="width: 100px;" type="text"/>	
Reviewed by Trade Supervisor(s)/Shop(s) Affected:			
Name: <input style="width: 100px;" type="text" value="Fire Safety"/>		Name: <input style="width: 100px;" type="text" value="Electrical Shop"/>	
Date: <input style="width: 100px;" type="text"/>		Date: <input style="width: 100px;" type="text"/>	
Signature/Stamp: <input style="width: 150px;" type="text" value="JF"/>		Signature/Stamp: <input style="width: 150px;" type="text"/>	
Reviewed by:			
Name: <input style="width: 100px;" type="text"/>		Principal Occupants:	
Date: <input style="width: 100px;" type="text"/>		Name: <input style="width: 100px;" type="text"/> Ext. <input style="width: 50px;" type="text"/> Date: <input style="width: 100px;" type="text"/>	
Signature/Stamp: <input style="width: 150px;" type="text"/>		Name: <input style="width: 100px;" type="text"/> Ext. <input style="width: 50px;" type="text"/> Date: <input style="width: 100px;" type="text"/>	
Name: <input style="width: 100px;" type="text"/>		Name: <input style="width: 100px;" type="text"/> Ext. <input style="width: 50px;" type="text"/> Date: <input style="width: 100px;" type="text"/>	
Signature/Stamp: <input style="width: 150px;" type="text"/>		Name: <input style="width: 100px;" type="text"/> Ext. <input style="width: 50px;" type="text"/> Date: <input style="width: 100px;" type="text"/>	
Service Centre Representative: <input style="width: 100px;" type="text"/>		Approval to Proceed: <input style="width: 100px;" type="text"/>	
Date: <input style="width: 100px;" type="text"/>		Date: <input style="width: 100px;" type="text"/>	
<div style="border: 2px solid green; padding: 10px; display: inline-block;"><h2 style="margin: 0;">APPROVED</h2><p style="margin: 5px 0;">By Joe Arbique (jarbique@uwo.ca) at 8:21 am, Jan 15, 2014</p></div>			
Notes: <input style="width: 100%;" type="text"/>			