



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

Time(s):

Building(s) #1

#2

Affected:

#3

#4

Areas/Rooms Affected Alternate Route/Service:

Entire Building

Service to be #1

#2

interrupted:

#3

#4

Description/Reason for Project:

Testing of fire alarm strobes.

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.

Requester:

Date of Request:

Supervising Tradesperson:

Unit:

Trade Manager:

Unit:

Date:

Contractor:

Phone #

Coordinator/Project Manager:

Phone #

Date:

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

Name:

Date:

Name:

Date:

Signature/
Stamp:

REVIEWED

By Frank (ffaroni@uwo.ca) at 8:41 am, Sep 14, 2016

Signature/
Stamp:

Name:

Date:

Principal Occupants:

Signature/
Stamp:

Name:

Ext.

Date:

Name:

Name:

Ext.

Date:

Name:

Name:

Ext.

Date:

Name:

Name:

Ext.

Date:

Name:

Date:

Signature/
Stamp:

Approval to Proceed:

Date:

APPROVED

By Dan Trudgeon (dtrudgeo@uwo.ca) at 8:05 am, Sep 15, 2016

Notes: