

## 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 January 20, 2017   |                   | Time(s):             | 7:00 A.M 8:00 A.M.   |            |                       |  |
|---|-------------------|----------------------|----------------------|------------|-----------------------|--|
| Building(s) #1 STAGING (STAB)  Affected: #3  Areas/Rooms Affected Alternate Route/Servi   | ce:               | #2 #4                |                      |            |                       |  |
| 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 #1 FIRE ALARM BELL TEST #2 #4  Description/Reason for Project:  |                   |                      |                      |            |                       |  |
|   |                   |                      |                      |            |                       |  |
| Requester: Fire Safety Date of  |                   |                      | Date of Request:     | JANUARY 12 | 2, 2017               |  |
| Supervising Tradesperson:   |                   | Unit:                |                      |            |                       |  |
| Trade Manager Unit: Date:   |                   |                      |                      |            | ite:                  |  |
| Contractor:   |                   |                      | Phone #              |            |                       |  |
| Frank Faroni Frank Faroni   |                   |                      |                      |            | ate: JANUARY 12, 2017 |  |
| Reviewed by Trade Manager(s)/Shop(s) Affected:  | <sup>-</sup>   □  | M                    |                      |            | <b>.</b>              |  |
| Name: Fire Safety   | Date: Jan 12, 201 |                      |                      |            | Date:                 |  |
| Signature/<br>Stamp:  |                   | Signature/<br>Stamp: |                      |            |                       |  |
| Name:   | Date:             | Principal (          | Principal Occupants: |            |                       |  |
| Signature/  |                   | Name:                |                      | Ext.       | Date:                 |  |
| Stamp:  |                   | Name:                |                      | Ext.       | Date:                 |  |
| Name:   | Date:             | Name:                |                      | Ext.       | Date:                 |  |
| Signature/  |                   | Name:                |                      | Ext.       | Date:                 |  |
| Stamp:  |                   |                      | Approval to Proceed: |            | Date:                 |  |
| Name:   | Date:             | APPROVED             |                      |            |                       |  |
| By Dan Trudgeon at 11:04 am, Jan 12, 2017   |                   |                      |                      |            |                       |  |
| Notes:  |                   |                      |                      |            |                       |  |
|   |                   |                      |                      |            |                       |  |