

## Planned Outage and Interruption Request

Work Owner \_\_\_\_\_ Organization \_\_\_\_\_ Phone \_\_\_\_\_

Onsite Contact \_\_\_\_\_ Phone \_\_\_\_\_

Project # \_\_\_\_\_ Customer Request \_\_\_\_\_ WO Number \_\_\_\_\_

### Select Interruption Type:

<b>Building System Outage or Space Closure</b> <small>(Only if part of a building is out, Check all that apply)</small>		Building Access Control		Elevator		Laboratory Utility		Sanitary Sewer
		Electric Power		Heating Ventilation & A/C (HVAC)		Natural Gas		Domestic Water
		Building Space/Entrances/ Occupant Flow		Telephone/IT		Fumehood		Cooler/Freezer
		Emergency Power <small>(Life Safety Approval required)</small>		Other <small>(Explain below)</small>				
<b>Utility Outage</b> <small>(If entire building is out)</small>		Electric Power		Natural Gas		Sewer from Building		Domestic Water
		Hot Water <small>(Central Plant)</small>		Chilled Water <small>(Central Plant)</small>		Steam <small>(Central Plant)</small>		Other <small>(Explain Below)</small>
<b>Outside Closures</b>		Roadway		Sidewalk		Bike Lane		Waste Receptacle
		Parking Spaces		ADA Facilities		Traffic Signal		Other <small>(Explain below)</small>
<b>Life Safety System Outage</b> <small>(Required any time system or components are taken out of service)</small>		Fire Alarm		Fire Suppression System and/or Fire Pump		Special Hazards Range Hood		Fire Hydrant
		Fire watch required? Yes or No <small>(Determined by Risk Management &amp; Safety and University Engineer)</small>				Note:		
<b>Life Safety Notifications</b>		Annual Fire Alarm Test and Inspection		Fire Suppression System Testing		Fire Alarm System Testing		Fire Alarm System Download
<b>Notifications</b>		Unplanned Outage		Preventative Maintenance		Risk Mgt. & Safety Inspection		Other <small>(Explain below)</small>

**Description of Work Activity**

**Building(s) or Location(s) Affected**

**Specific Space Affected (Room Numbers)**

**How are the building clients or University stakeholders affected? What will they notice?**

**Schedule:**

**Start Date:** \_\_\_\_\_ **Start Time:** \_\_\_\_\_ **End Date:** \_\_\_\_\_ **End Time:** \_\_\_\_\_

## Planned Outage and Interruption Request

### Planning Reviews (Per Review Matrix):

Organization	Review Required?	Reviewer	Review Date
Maintenance Zone Manager or Supervisor			
Utility Supervisor			
Others as Needed			

### Client Approvals (Per Approval Matrix):

Organizations Affected by Work, Interruption, or Outage			
Client	Building(s)	Key Contact	Approval Date

### Facilities Management Approvals (Per the Approval Matrix)

Facilities Management								
Maintenance			Utility and Energy			Design & Construction		
Approval Required?	Approved By:	Date	Approval Required?	Approved By:	Date	Approval Required?	Approved By:	Date
	Josh Conradson						Andrew Spurlin	
Campus Services/Landscape								
Approval Required?	Approved By:	Date						
For Life Safety Systems								
University Engineer			Risk Management and Safety					
Approval Required?	Approved By:	Date	Approval Required?	Approved By:	Date			
	Bob Hix			Jessica Covington				
Work Management								
Received By:		Date Received	Time Received		Date Notice Issued		Time Issued	

Work Owner Signature: Justin Gilliam Date \_\_\_\_\_

## Planned Outage and Interruption Request

### Form Purpose

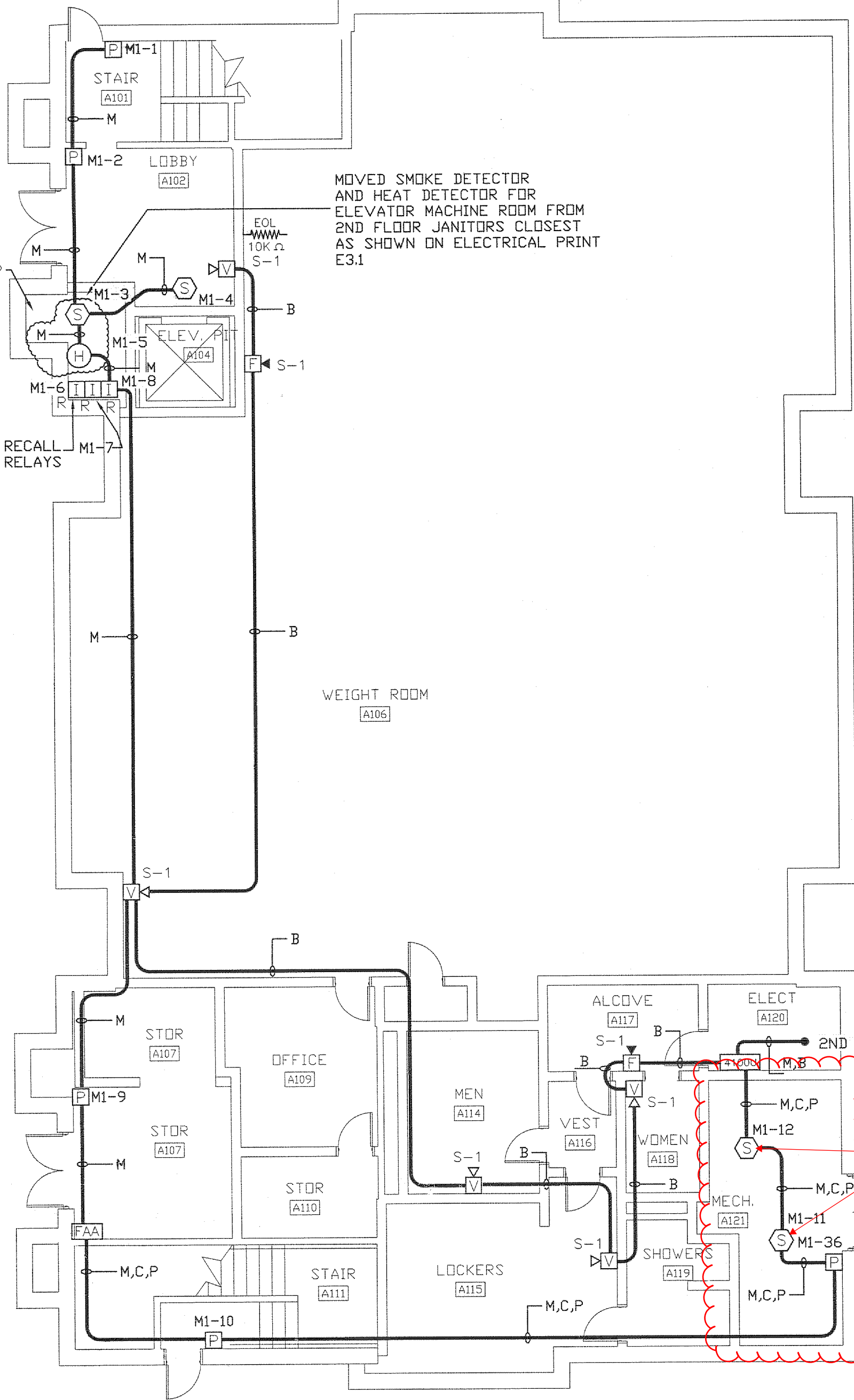
This form is required any time a planned outage, space closure or outside facility closure is needed. The intent is to document approval and provide the information necessary for concise communication of these events to the campus and others with need to know. It is also used to provide information necessary to communicate unplanned outages, Preventative Maintenance activities, and other events to the campus community.

The Work Owner is responsible for planning and scheduling the outage or closure, obtaining the necessary approvals, and submitting the completed form to Work Management. Work Management will then issue the communication to the appropriate campus stakeholders.

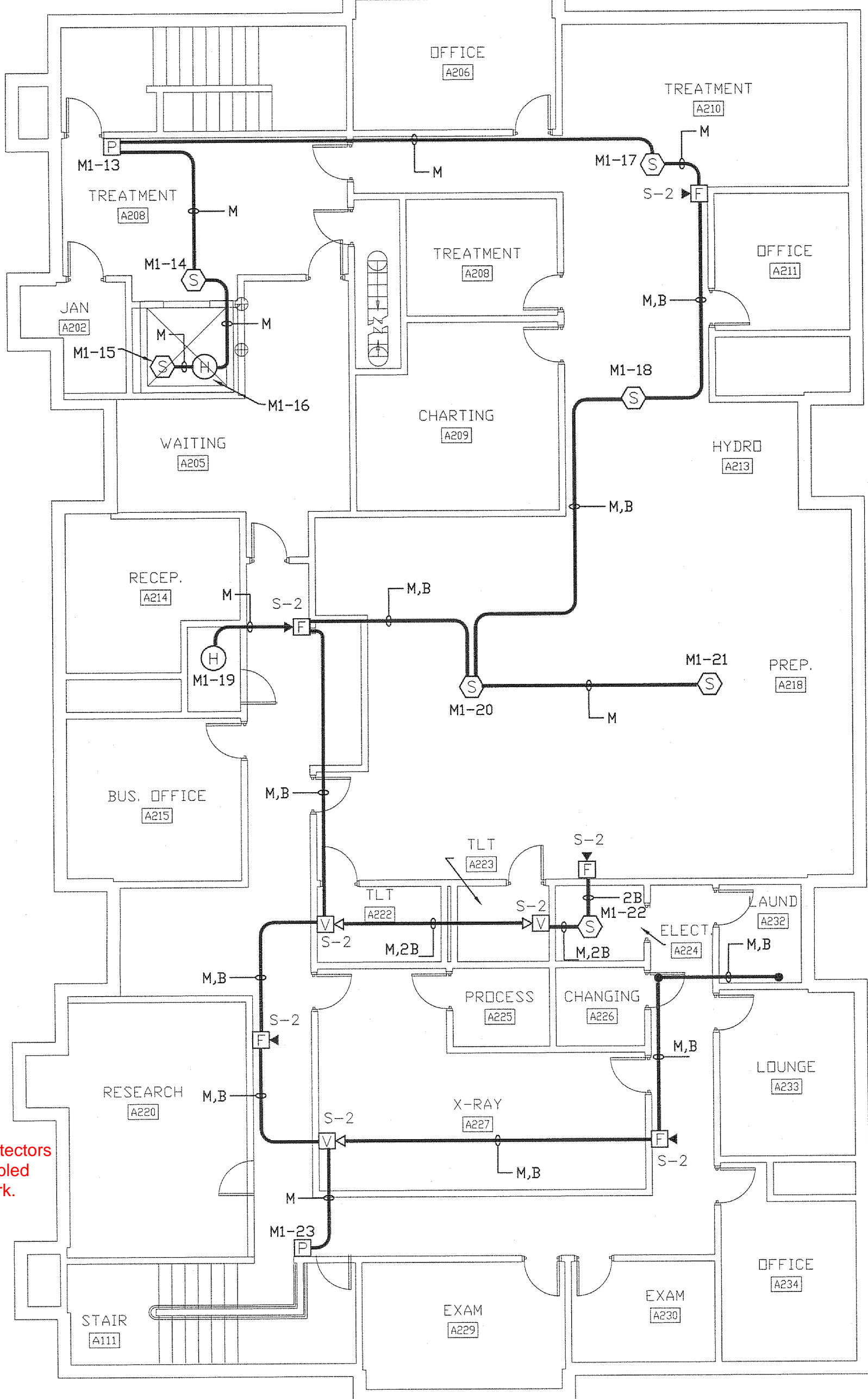
### Information and Instructions

1. **Work Owner** – Individual responsible for conduct of the work requiring the interruption or outage. Include Auburn University Organization and cell phone number.
2. **Onsite Contact** – Individual directly responsible for the conduct of the work and typical will be on site during implementation. Include cell phone number.
3. **Project Number** – Auburn University Facilities project number if applicable
4. **Customer Request** – AiM Request number if applicable.
5. **WO Number** – AiM work order number if applicable.
6. **Interruption Type** – Select the system, component or space type that will be interrupted and out of service. Select all that apply, however if a utility outage is selected and the entire building will be interrupted do not select individual building systems. As example, do not select HVAC in a building if electric power will be off to the entire building.
7. **Life Safety System Outage** – Required if a life safety system or system component is taken out of service, or if any other system (domestic water, electric power) is taken out of service and prevents life safety system from functioning. Outages on life safety system require approval of Risk Management and Safety and University Engineer. They will determine if a fire watch will be required.
8. **Life Safety Notifications** - Used to communicate to building occupants and others when listed activities are taking place. No review or approval required.
9. **Notifications** - Used to communicate unplanned outages to campus. Can also be used to communicate Preventative Maintenance activities, Risk Management and Safety Inspections and Other activities as needed.
10. **Description of Work Activity** – Describe specifically what work will be performed during the outage.
11. **Building(s) or Location(s) Affected** – List all buildings affected using official university name. If outside space describe the location of the activity including buildings that will be directly impacted if necessary.
12. **Specific Space Affected** – Provide floor, room numbers, or area of the building that will be affected.
13. **How are the building clients or University stakeholders affected? What will they notice?** – Provide sentence on the specific impact of the outage and describe what University stakeholders will notice.
14. **Schedule** – Provide start and estimated end dates and times
15. **Planning Reviews** – Discussions conducted with designated individuals during the planning and scheduling phase of the outage or interruption. The review matrix defines the minimum reviews required, additional reviews may be required depending on the nature of the work. No signature or hard approval documentation is required for reviews.
16. **Client Approvals** – Obtain approval of Key Contact of all organizations with assigned space in affected buildings or in buildings near the work. Client approval can be documented with e mail or signature on the form. On short notice outages, verbal client approval is acceptable.
17. **Facilities Management Approvals** – Obtain necessary approval based on the type of outage and the required approvals from the approval matrix.
18. **Work Manager Signature** – Sign and date the form and submit to Work Management

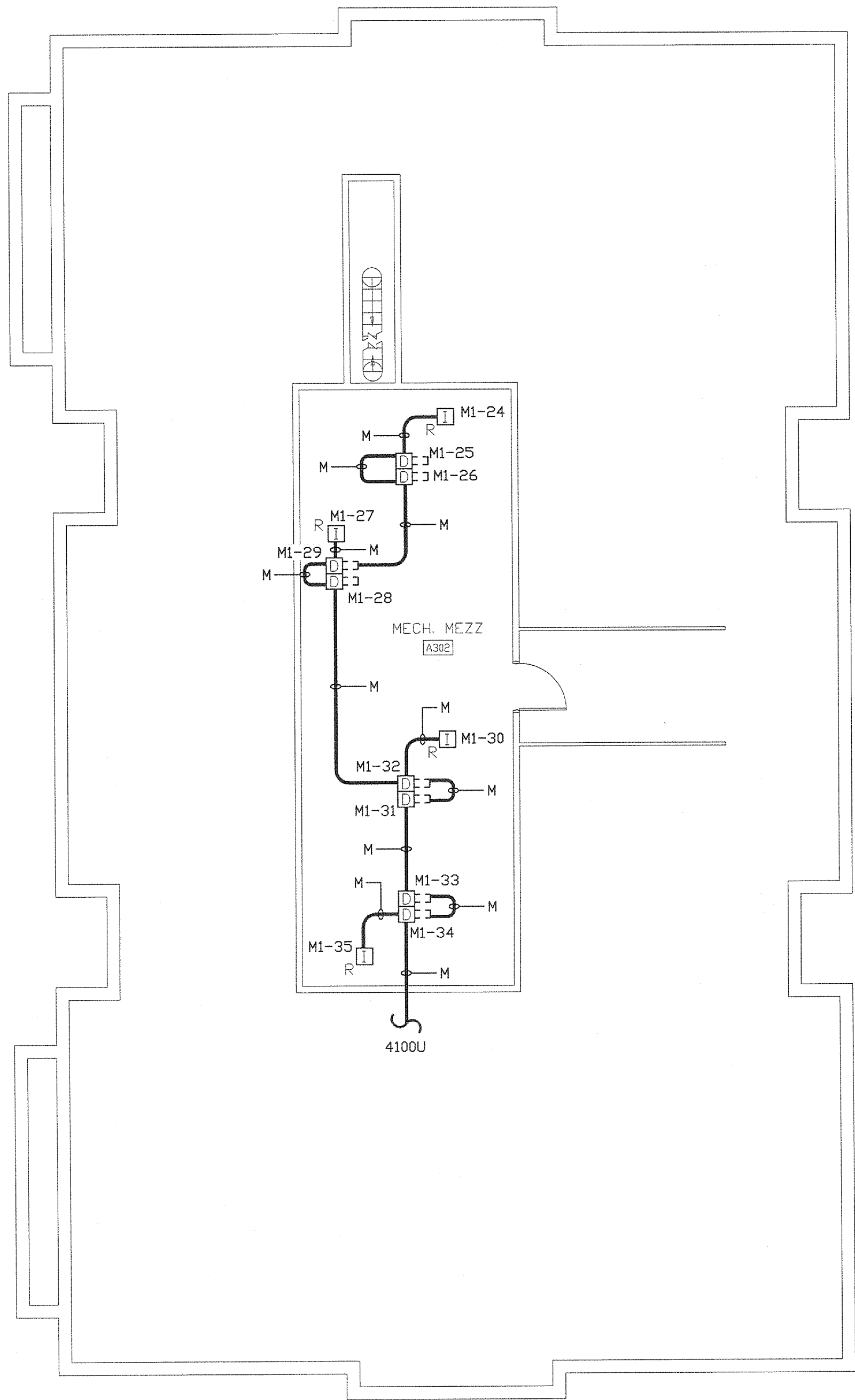




FIRE ALARM - 1ST FLOOR  
FIRE ALARM SYSTEM  
SCALE: 1/8"=1'-0"



FIRE ALARM - 2ND FLOOR  
FIRE ALARM SYSTEM  
SCALE: 1/8"=1'-0"



FIRE ALARM - MECHANICAL MEZZANINE  
FIRE ALARM SYSTEM  
SCALE: 1/8"=1'-0"

SYMBOL LEGEND		
PANELS		
SYMBOL	QTY.	DESCRIPTION
4100U	1	FIRE ALARM CONTROL PANEL 4100-9111
FAA	1	LCD ANNUNCIATOR 4603-9101
INITIATING DEVICES		
SYMBOL	QTY.	DESCRIPTION
PI	7	PULL STATION 4099-9001
S	11	SMOKE DETECTOR 4098-9714 WITH 4098-9792 BASE
H	3	HEAT DETECTOR 4096-9733 WITH 4098-9792 BASE
R	7	IAM RELAY 4090-9002
DS	8	DUCT SENSOR HOUSING 4098-9755 WITH 4098-9792 BASE
NOTIFICATION APPLIANCES		
SYMBOL	QTY.	DESCRIPTION
V	8	VISUAL ONLY 75CD 4904-9332
A	7	AUDIO/VISUAL 75CD 4903-9418

### WIRE LEGEND

- A - (2) #14-AWG (ZONE)
- B - (2) #12-AWG (SIGNAL)
- C - (2) #12-AWG (CHIME CIRCUIT)
- D - (2) #14-AWG (DUCT DETECTOR POWER)
- E - (2) #14-AWG (AUX. CONTROL - RELAY)
- F - (2) #14-AWG (AUX. POWER)
- G - (2) #14-AWG (DOOR HOLDER POWER)
- L - (3) #14-AWG (TRIP CIRCUIT)
- M - (2) #18-AWG TW/SHLD (MAPNET COMMUNICATION) (SEE GENERAL NOTES)
- P - (2) #14-AWG (MAPNET POWER)
- R - 1 RG-59U COAX (VIDEO SIGNAL) (MAX LENGTH 1000 FEET)
- S - 1 TWISTED PAIR #18 SHIELDED (SPEAKER CIRCUIT) (MAX LENGTH 5000 FEET)
- T - (2) #18-AWG TW/SHLD (PHONE CIRCUIT)
- V - (2) #14-AWG (VISUAL ONLY CIRCUIT)
- Z - (2) #14-AWG (RETURN ZONE TROUBLE LOOP)

Reviewed ( )  
Not Reviewed ( )  
Not Applicable ( )  
Revise and Resubmit ( )

This review does not relieve the vendor and/or subcontractor from meeting the requirements of the contract drawings, specs and addenda. This review is not a warranty of quantities, dimensions, identifying processes or techniques of construction. The vendor and/or subcontractor are responsible for coordinating their work with other trades and performing the work in a satisfactory manner.

By: [Signature] Date: 6 FEB 03

Approved as Noted ( )  
If checked above fabrication MAY NOT be undertaken. Approved does not authorize changes to General and/or notes stated in separate letter or Change Order.

If Checked below, fabrication MAY NOT be undertaken. Resubmit with revised copies for final approval. Construction shall be limited to items noted.

Review and Resubmit ( )  
Not Approved ( )

Resubmit is only for conformance with the design criteria of the Project and conformance with the information given in the Contract Documents. The Contractor is responsible for conformance with the design criteria and for the size of the fabrication processes to the means, methods, techniques, sequences and schedules of construction, and for coordination of the work of all trades.

COOPER CONSTRUCTION, INC.  
3101 13th Avenue, Suite 100  
JACKSON, MS 39201

Date: 2/1/03

16724  
Submitter was reviewed for compliance with plans & specs and approval is recommended  
By: [Signature] Date: 2/3/03

### GENERAL NOTES:

- EXACT DEVICE LOCATIONS ARE SHOWN ON CONTRACT DRAWINGS AND SHALL BE DETERMINED BY THE ARCHITECT, ELECTRICAL ENGINEER AND/OR AUTHORITY HAVING JURISDICTION.
- WIRING SHALL BE IN ACCORDANCE WITH CONTRACT DOCUMENTATION AND SPECIFICATIONS.
- WHEN RUNNING WIRES TO PANELS, IDENTIFY WIRES APPROPRIATELY: 120VAC INPUT POWER, DPS INPUT, ZONE 1, ZONE 2, SIGNAL CIRCUIT #1, ETC., & IDENTIFY ALL POLARITIES.
- USE PANEL KNOCKOUTS THAT ARE AVAILABLE ON PANEL BACKBOXES. DO NOT ENTER PANELS AT BATTERY LOCATIONS.
- NEATLY WIRE & LABEL JUNCTION BOXES AND DEVICES FOR EASE OF TERMINATION, INSPECTION AND TROUBLE SHOOTING.
- ALL WIRING, EXCEPT INCOMING POWER AND GROUNDING WIRES, MUST BE FREE FROM GROUNDS OR SHORTS AND HAVE A RESISTANCE OF ONE MEG. OR HIGHER TO EARTH.
- CLASS 1, POWER, ELECTRIC LIGHT & NON POWER LIMITED WIRE CIRCUITS SHALL NOT BE RUN IN SAME CONDUIT WITH FIRE ALARM POWER LIMITED CIRCUITS PER NEC 760-52. OPEN CONDUCTORS MUST BE SEPARATED BY AT LEAST 2"
- CONTACT SIMPLEX GRINNELL @ (770) 483-4490 IF THERE ARE ANY QUESTIONS OR 5 DAYS PRIOR TO SYSTEM CHECKOUT.
- SMOKE DETECTOR HEAD SHALL NOT BE PLACED IN BASE UNTIL CONSTRUCTION IS COMPLETE TO MINIMIZE DUST ACCUMULATION IN SMOKE SENSOR CHAMBER.
- MAXIMUM DISTANCE TO ANY ADDRESSABLE DEVICE IS 2500 FEET, NFPA STYLE 4 SLG. MAXIMUM LOOP DISTANCE IS 2500 FEET, NFPA 72 STYLE 5 SLG. TOTAL LENGTH OF WIRE ON ONE MAPNET CHANNEL SHALL NOT EXCEED 10,000 FEET INCLUDING ALL T-TAPS & PARALLEL RUNS.
- ALL DRAWINGS WITH A SCALE SHOWN IN THE TITLE BLOCK ARE APPROXIMATELY THE SHOWN SCALE, DUE TO THE POSSIBLE +/- ERROR WHEN DIGITIZED.

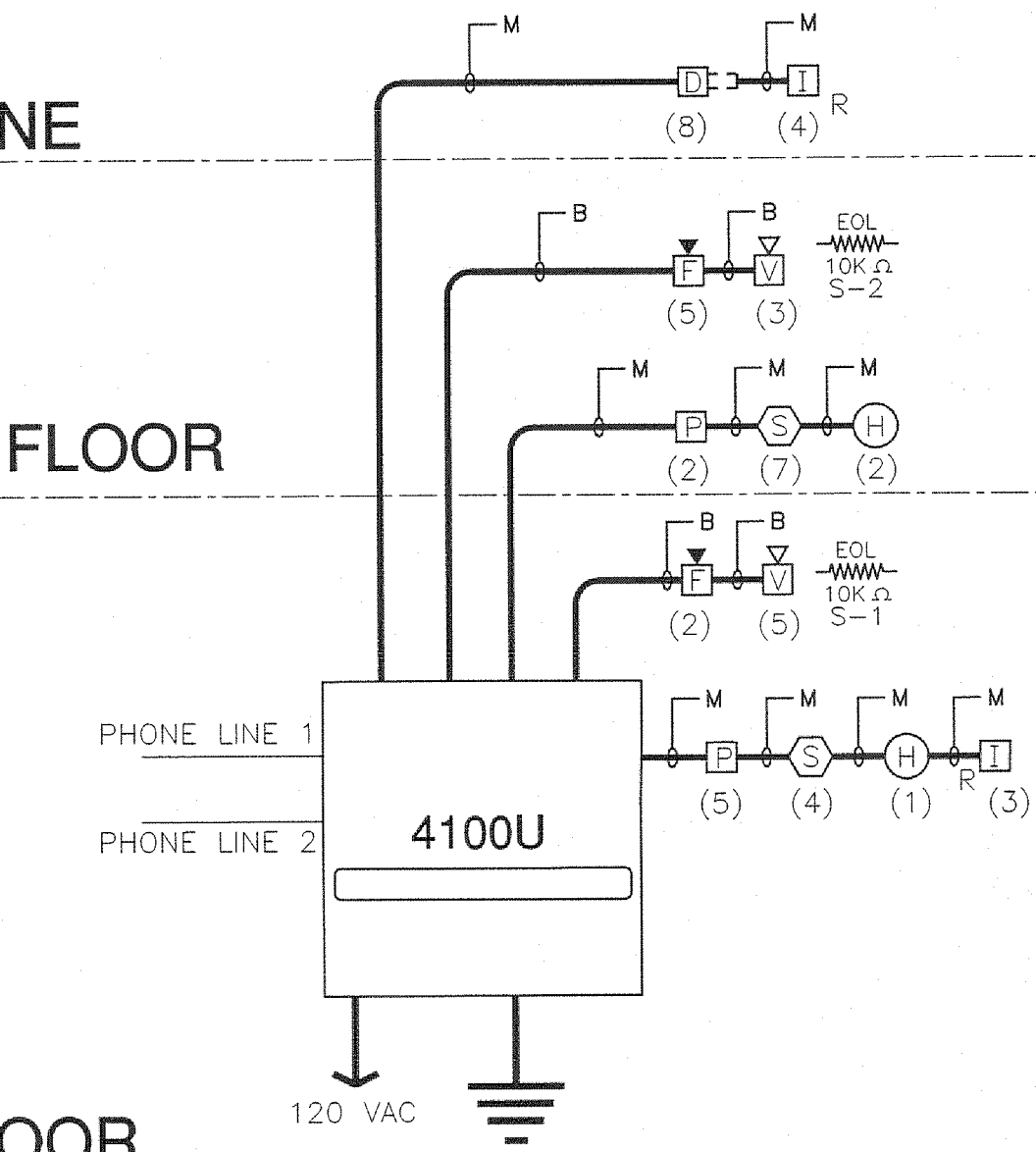
**SimplexGrinnell**

ADDRESSES USED THIS SHEET  
MAPNET #1: 1 - 36

### MEZZANINE

### SECOND FLOOR

### FIRST FLOOR



RISER  
FIRE ALARM SYSTEM  
SCALE: NOT TO SCALE

\*\*\*NOTE\*: THESE DRAWINGS ARE DESIGNED FOR WIRING CIRCUITRY ONLY AND NOT INTENDED FOR CONDUIT LAYOUT. \*\*

**tyco** Fire & Security

**SimplexGrinnell**

2192 EAST VIEW PARKWAY, SUITE 100  
CONYERS, GA 30013  
SALES: (770) 483-4490  
FAX: (770) 483-1655

REVISION DESCRIPTION		DATE	
NO.			

FIRE ALARM SYSTEM - 1ST, 2ND FLOORS & MEZZANINE

SCALE: 1/8" = 1' - 0"

AU - PLAINSMAN PARK

361 S. DONAHUE DRIVE  
AUBURN, AL 36849

DRAWN BY:	DATE:
N.MELNIK	01/28/03
DESIGNED BY:	DATE:
APPROVED BY:	DATE:
PROJECT NUMBER:	
ELECTRICAL CONTRACTOR: AUBURN ELECTRICAL CONSTRUCTION CO	
SHEET NUMBER: FA1 1 OF 3	



# FIRE WATCH PATROL LOG SHEET

Address: \_\_\_\_\_

Fire Watch Duties Conducted By: \_\_\_\_\_  
(print name & position)

Fire Watch Commenced:      Date: \_\_\_\_\_      Time: \_\_\_\_\_

ROUNDS	DATE (m/d/y)	START TIME (circle a.m./p.m.)	FINISH TIME (circle a.m./p.m.)	AREAS PATROLLED & COMMENTS	INITIALS
1.	/ /	a.m. p.m.	a.m. p.m.		
2.	/ /	a.m. p.m.	a.m. p.m.		
3.	/ /	a.m. p.m.	a.m. p.m.		
4.	/ /	a.m. p.m.	a.m. p.m.		
5.	/ /	a.m. p.m.	a.m. p.m.		
6.	/ /	a.m. p.m.	a.m. p.m.		
7.	/ /	a.m. p.m.	a.m. p.m.		
8.	/ /	a.m. p.m.	a.m. p.m.		
9.	/ /	a.m. p.m.	a.m. p.m.		
10.	/ /	a.m. p.m.	a.m. p.m.		
11.	/ /	a.m. p.m.	a.m. p.m.		
12.	/ /	a.m. p.m.	a.m. p.m.		
13.	/ /	a.m. p.m.	a.m. p.m.		
14.	/ /	a.m. p.m.	a.m. p.m.		
15.	/ /	a.m. p.m.	a.m. p.m.		
16.	/ /	a.m. p.m.	a.m. p.m.		
17.	/ /	a.m. p.m.	a.m. p.m.		
18.	/ /	a.m. p.m.	a.m. p.m.		

**Fire Watch:**

1. The contractor shall be responsible for providing Fire Watch as required outlined below to include all costs inclusive with bid prices.
2. Fire Watch is required under the following circumstances and situations:
  - a. Any time hot work is being performed (see attached Hot Work Permit Application) in an existing building (Note: Hot Work Permits are administered by Auburn University Risk Management and Safety.)
  - b. Any time a fire alarm or portions of the fire alarm are taken out of service for more than four (4) hours in a twenty-four (24) hour period in an occupied building
  - c. Any time a fire suppression system (sprinklers or special hazard systems) are taken out of service for any period of time
3. The contractor shall be responsible for planning their work and coordinating with the university project lead so that adequate coordination with University vendors for fire alarm and sprinkler service contracts can be performed and adequate notification of building occupants can occur prior to the outage.
4. Fire Watch shall be performed in accordance with Alabama State Fire Marshal's Office (<http://www.firemarshal.alabama.gov/FireWatch.aspx>) and Auburn University's Risk Management's requirements for Fire Watch outlined below:
  - a. Frequency of Patrol:
    - i. Sleeping, Assembly, or Institutional Facility: Once every 15 minutes
    - ii. Other Facility Types: Once every 30 minutes
  - b. Fire Watch Personnel:
    - i. Shall have access to one approved means of communication (e.g. cell phone)
    - ii. Shall know the exact 911 address and geographical location of the building
    - iii. Shall know how to contact 911 and report a fire or other emergency
    - iv. Shall be familiar with the buildings and have an accepted plan for patrolling the property
    - v. Shall be trained in the use of fire extinguishers
    - vi. Shall have access to all facility fire extinguishers and know their locations
    - vii. Shall have knowledge of and be trained in the facilities evacuation plan
    - viii. Shall be able to communicate with non-English speaking residents well enough to give an evacuation order
    - ix. Shall not be permitted to perform any other duties while on duty
    - x. Shall not be impaired and shall remain awake and alert at all times while on duty
    - xi. Shall keep a log of fire watch to include address of the facility, time of each patrol, name of fire watch person, and notes of any related activities performed

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**RE: Plainsman Park Rehab FA Outage**

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**From** Fred Buchanan <buchaf1@auburn.edu>

**Date** Tue 2025-08-12 11:49 AM

**To** Jessica Covington <jlc0105@auburn.edu>; Justin Gilliam <jmg0047@auburn.edu>; Eric Moore <jem0028@auburn.edu>; Bruce Arnold <gba0004@auburn.edu>; Scott McClure <mccluws@auburn.edu>; Josh Conradson <conrajr@auburn.edu>; Travis Tally <tallytp@auburn.edu>; Bob Hix <hixjame@auburn.edu>; Elizabeth De Kruif <erd0023@auburn.edu>; Wade Wilkerson <cww0017@auburn.edu>; Anna Thompson <gueriak@auburn.edu>

I approve

Fred

---

**From:** Jessica Covington <jlc0105@auburn.edu>

**Sent:** Tuesday, August 12, 2025 8:18 AM

**To:** Justin Gilliam <jmg0047@auburn.edu>; Eric Moore <jem0028@auburn.edu>; Bruce Arnold <gba0004@auburn.edu>; Scott McClure <mccluws@auburn.edu>; Josh Conradson <conrajr@auburn.edu>; Fred Buchanan <buchaf1@auburn.edu>; Travis Tally <tallytp@auburn.edu>; Bob Hix <hixjame@auburn.edu>; Elizabeth De Kruif <erd0023@auburn.edu>; Wade Wilkerson <cww0017@auburn.edu>; Anna Thompson <gueriak@auburn.edu>

**Subject:** RE: Plainsman Park Rehab FA Outage

Hi Justin,  
I approve.

Thank you,



Jessica L. Covington, CSP  
Safety and Health Program Manager

Risk Management and Safety  
1161 W. Samford Ave., Bldg. 9 | Auburn, AL 36849  
(C) 334-734-1715

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**RE: Plainsman Park Rehab FA Outage**

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**From** Jessica Covington <jlc0105@auburn.edu>

**Date** Tue 2025-08-12 8:17 AM

**To** Justin Gilliam <jmg0047@auburn.edu>; Eric Moore <jem0028@auburn.edu>; Bruce Arnold <gba0004@auburn.edu>; Scott McClure <mccluws@auburn.edu>; Josh Conradson <conrajr@auburn.edu>; Fred Buchanan <buchaf1@auburn.edu>; Travis Tally <tallytp@auburn.edu>; Bob Hix <hixjame@auburn.edu>; Elizabeth De Kruif <erd0023@auburn.edu>; Wade Wilkerson <cww0017@auburn.edu>; Anna Thompson <gueriak@auburn.edu>

Hi Justin,  
I approve.

Thank you,



Jessica L. Covington, CSP  
Safety and Health Program Manager

Risk Management and Safety  
1161 W. Samford Ave., Bldg. 9 | Auburn, AL 36849  
(C) 334-734-1715

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**From:** Justin Gilliam <jmg0047@auburn.edu>

**Sent:** Tuesday, August 12, 2025 7:15 AM

**To:** Eric Moore <jem0028@auburn.edu>; Bruce Arnold <gba0004@auburn.edu>; Scott McClure <mccluws@auburn.edu>; Josh Conradson <conrajr@auburn.edu>; Fred Buchanan <buchaf1@auburn.edu>; Travis Tally <tallytp@auburn.edu>; Bob Hix <hixjame@auburn.edu>; Jessica Covington <jlc0105@auburn.edu>; Elizabeth De Kruif <erd0023@auburn.edu>; Wade Wilkerson <cww0017@auburn.edu>; Anna Thompson <gueriak@auburn.edu>

**Subject:** Plainsman Park Rehab FA Outage

All,



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**RE: Plainsman Park Rehab FA Outage**

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**From** Wade Wilkerson <cww0017@auburn.edu>

**Date** Tue 2025-08-12 8:06 AM

**To** Justin Gilliam <jmg0047@auburn.edu>; Eric Moore <jem0028@auburn.edu>; Bruce Arnold <gba0004@auburn.edu>; Scott McClure <mccluws@auburn.edu>; Josh Conradson <conrajr@auburn.edu>; Fred Buchanan <buchaf1@auburn.edu>; Travis Tally <tallytp@auburn.edu>; Bob Hix <hixjame@auburn.edu>; Jessica Covington <jlc0105@auburn.edu>; Elizabeth De Kruif <erd0023@auburn.edu>; Anna Thompson <gueriak@auburn.edu>

I approve

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**From:** Justin Gilliam <jmg0047@auburn.edu>

**Sent:** Tuesday, August 12, 2025 7:15 AM

**To:** Eric Moore <jem0028@auburn.edu>; Bruce Arnold <gba0004@auburn.edu>; Scott McClure <mccluws@auburn.edu>; Josh Conradson <conrajr@auburn.edu>; Fred Buchanan <buchaf1@auburn.edu>; Travis Tally <tallytp@auburn.edu>; Bob Hix <hixjame@auburn.edu>; Jessica Covington <jlc0105@auburn.edu>; Elizabeth De Kruif <erd0023@auburn.edu>; Wade Wilkerson <cww0017@auburn.edu>; Anna Thompson <gueriak@auburn.edu>

**Subject:** Plainsman Park Rehab FA Outage

All,

Please see the attached fire alarm outage request for Plainsman Park Rehab. Let me know if you have any questions.

Thanks,

**Justin Gilliam**

*Construction Project Manager*

**Auburn University Facilities Management**

1161 W Samford Ave, Auburn University, AL 36849

C: 334-734-3273 | [jmg0047@auburn.edu](mailto:jmg0047@auburn.edu)



Outlook

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## RE: Plainsman Park Rehab FA Outage

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From **Bob Hix** <[hixjame@auburn.edu](mailto:hixjame@auburn.edu)>

Date Tue 2025-08-12 7:22 AM

To Justin Gilliam <[jmg0047@auburn.edu](mailto:jmg0047@auburn.edu)>; Eric Moore <[jem0028@auburn.edu](mailto:jem0028@auburn.edu)>; Bruce Arnold <[gba0004@auburn.edu](mailto:gba0004@auburn.edu)>; Scott McClure <[mccluws@auburn.edu](mailto:mccluws@auburn.edu)>; Josh Conradson <[conrajr@auburn.edu](mailto:conrajr@auburn.edu)>; Fred Buchanan <[buchaf1@auburn.edu](mailto:buchaf1@auburn.edu)>; Travis Tally <[tallytp@auburn.edu](mailto:tallytp@auburn.edu)>; Jessica Covington <[jlc0105@auburn.edu](mailto:jlc0105@auburn.edu)>; Elizabeth De Kruif <[erd0023@auburn.edu](mailto:erd0023@auburn.edu)>; Wade Wilkerson <[cww0017@auburn.edu](mailto:cww0017@auburn.edu)>; Anna Thompson <[gueriak@auburn.edu](mailto:gueriak@auburn.edu)>

Approved

**Bob Hix, P.E.**

C: 334-740-8247 | [bobhix@auburn.edu](mailto:bobhix@auburn.edu)

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**From:** Justin Gilliam <[jmg0047@auburn.edu](mailto:jmg0047@auburn.edu)>

**Sent:** Tuesday, August 12, 2025 7:15 AM

**To:** Eric Moore <[jem0028@auburn.edu](mailto:jem0028@auburn.edu)>; Bruce Arnold <[gba0004@auburn.edu](mailto:gba0004@auburn.edu)>; Scott McClure <[mccluws@auburn.edu](mailto:mccluws@auburn.edu)>; Josh Conradson <[conrajr@auburn.edu](mailto:conrajr@auburn.edu)>; Fred Buchanan <[buchaf1@auburn.edu](mailto:buchaf1@auburn.edu)>; Travis Tally <[tallytp@auburn.edu](mailto:tallytp@auburn.edu)>; Bob Hix <[hixjame@auburn.edu](mailto:hixjame@auburn.edu)>; Jessica Covington <[jlc0105@auburn.edu](mailto:jlc0105@auburn.edu)>; Elizabeth De Kruif <[erd0023@auburn.edu](mailto:erd0023@auburn.edu)>; Wade Wilkerson <[cww0017@auburn.edu](mailto:cww0017@auburn.edu)>; Anna Thompson <[gueriak@auburn.edu](mailto:gueriak@auburn.edu)>

**Subject:** Plainsman Park Rehab FA Outage

All,

Please see the attached fire alarm outage request for Plainsman Park Rehab. Let me know if you have any questions.

Thanks,

**Justin Gilliam**

*Construction Project Manager*

**Auburn University Facilities Management**

1161 W Samford Ave, Auburn University, AL 36849

C: 334-734-3273 | [jmg0047@auburn.edu](mailto:jmg0047@auburn.edu)



Outlook

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**Re: Plainsman Park Rehab FA Outage**

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**From** Josh Conradson <conrajr@auburn.edu>

**Date** Wed 2025-08-13 12:52 PM

**To** Justin Gilliam <jmg0047@auburn.edu>

**Cc** Eric Moore <jem0028@auburn.edu>; Bruce Arnold <gba0004@auburn.edu>; Scott McClure <mccluws@auburn.edu>

Justin,

Outage approved. Was watching the responses and just missed responding after Fred.

Thanks,

**Joshua R. Conradson, M.Ed, PMP, CEFP**

*Director of Maintenance*

**Auburn University Facilities Management**

1161 W Samford Ave, Auburn University, AL 36849

C: [334-740-8218](tel:334-740-8218) | [conrajr@auburn.edu](mailto:conrajr@auburn.edu)

On Aug 13, 2025, at 12:51 PM, Justin Gilliam <jmg0047@auburn.edu> wrote:

Did you guys get a chance to review and approve this outage? If I missed one of your replies, I apologize.

Thanks,

**Justin Gilliam**

*Construction Project Manager*

**Auburn University Facilities Management**

1161 W Samford Ave, Auburn University, AL 36849