

ACCESS TO UWM'S PA SYSTEMS AND FIRE ALARM PANELS

The purpose of this document is to delineate the University of Wisconsin-Milwaukee's ("UWM's") rules and expectations relating to access to the public address systems ("PA systems") that are a part of the Siemens and Simplex fire alarm panel units ("Fire Alarm Panels") on the UWM campus.

UWM provides keys to the Fire Alarm Panels to the building chairs or their designees ("Building Chairs") for use in building emergency notification. Building Chairs are authorized to use the PA system to announce building emergencies. Building Chairs are not authorized to access or use the PA system or the Fire Alarm Panels for any other purpose, including but not limited to suppressing or resetting fire alarms.

UWM will provide Building Chairs with keys to access the PA systems and train the Building Chairs to use the PA systems in the Fire Alarm Panel. UWM will also provide prepared text for use by the Building Chairs when making emergency notifications.

The Building Chairs are required to follow these rules and expectations:

1. To use the PA systems only for emergency building announcements.
2. To secure the keys and restrict access to the Fire Alarm Panel to those individuals who have been trained in the use and limitations of use of the PA systems, and who have signed the Acknowledgement below. It is the responsibility of each Building Chair to ensure that a signed Acknowledgement is on file with the Department of University Safety and Assurances for each designee who will have access to the Fire Alarm Panels.
3. To ensure that Fire Alarm Panels are securely locked after use.
4. To advise Facility Services of any malfunctioning equipment discovered or suspected during use.

The Building Chair(s) and their designees for the _____ building is/are:

Name:
Department:
Phone:
Email:

Name:
Department:
Phone :
Email :

Acknowledgement :

The undersigned Building Chair or designee acknowledges and agrees that he/she has been given a copy of the above rules and expectations, that he/she has read and understands them, that he/she will abide by them, and that he/she will direct any questions or concerns to University Safety and Assurances at x6339.

By: _____ Date: _____

Please sign, date and return this form to University Safety and Assurances, 270 Engelmann Hall.