



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:

Upper Mechanical Room

Service to be interrupted: #1

#2

#3

#4

Description/Reason for Project:

Testing new generator, some off gassing / smoke will occur need to turn off smoke detectors in duct work and area.

Requester:

Date of Request:

Supervising Tradesperson:

Unit:

Trade Supervisor:

Unit:

Date:

Contractor:

Phone #

Coordinator/Project Manager:

Phone #

Date:

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

Name:

Date:

Signature/
Stamp:

Signature/
Stamp:

APPROVED

By Frank (ffaroni@uwo.ca) at 11:41 am, Mar 20, 2015

Name:

Date:

Signature/
Stamp:

Name:

Date:

Signature/
Stamp:

Name:

Date:

Signature/
Stamp:

Principal Occupants:

Name:

Ext.

Date:

Name:

Ext.

Date:

Name:

Ext.

Date:

Name:

Ext.

Date:

Approval to Proceed:

Date:

APPROVED

By Dan Trudgeon (fminterr@uwo.ca) at 1:22 pm, Mar 20, 2015

Notes: