



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) Affected: #1 #2
 #3 #4
 Areas/Rooms Affected Alternate Route/Service:

Service to be interrupted: #1 #2
 #3 #4
 Description/Reason for Project:

Requester: Date of Request:

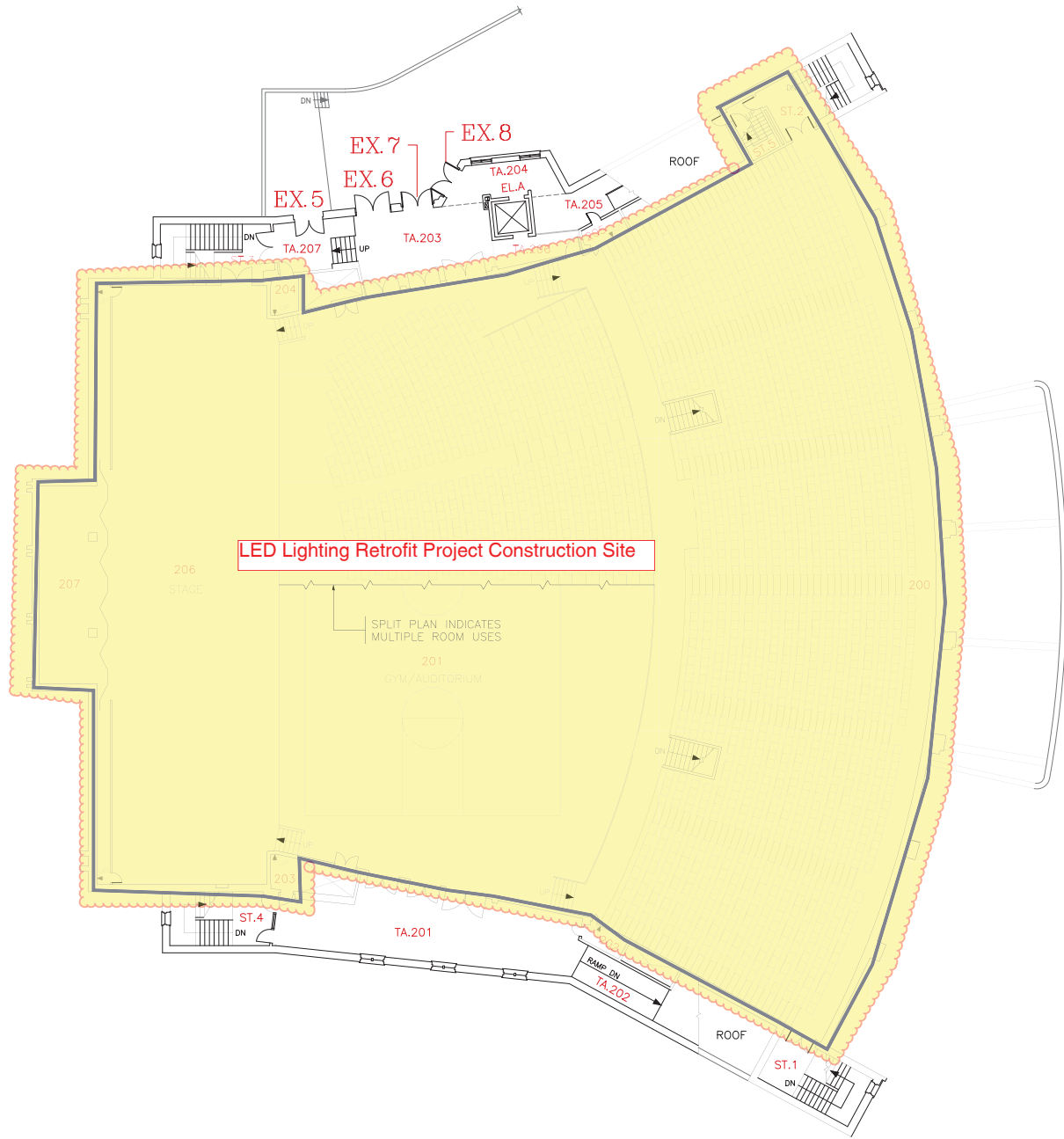
Supervising Tradesperson: Unit:
 Trade Manager: Unit: Date:

Contractor: Phone #
 Coordinator/Project Manager: Phone # Date:

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

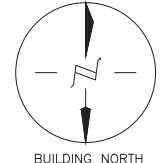
Name: <input type="text" value="Electrical Shop"/>	Date: <input type="text" value="Jun 23, 2017"/>	Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: REVIEWED <small>By Mark Widmeyer (mwidmey@uwo.ca) at 11:01 am, Jun 23, 2017</small>		Signature/Stamp: <input type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>	Principal Occupants:	
Signature/Stamp: <input type="text"/>		Name: Adam Kantor	Ext. 82224
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Approval to Proceed: <input type="text"/>	
Signature/Stamp: <input type="text"/>		APPROVED <i>By Dara Gomez at 11:50 am, Jun 23, 2017</i>	

Notes:



LED Lighting Retrofit Project Construction Site

SPLIT PLAN INDICATES
MULTIPLE ROOM USES



SCALE
DATE 2013-09-11
DRAWN HJH / RPT
CHECKED
APPROVED

FACILITIES MANAGEMENT

DWG. FILE No.
AH-04
GEODETTIC ELEV.
VARIES



BUILDING FLOOR PLAN - LEVEL 04
(AUDITORIUM, GYMNASIUM, MEZZANINE, STAGE)

ALUMNI HALL

04