

Notice of Project Western University Facilities Management Client Services 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail
Print Form

UNIVERSITY - CANADA		
Project Number: TBD Miniature Attached	Date/Schedule: July 26-August 20 2017	
Project Name: Alumni House Garbage/Recycle Room	Time:	
Building(s) #1 Alumni House Residence (AHR)	#2	
Affected: #3	#4	
Areas/Rooms Affected, Alternate Route/Service:		
Suite 30 (basement level).		
Service to be #1 Traffic Area	#2	
interrupted: #3	#4	
Description/Reason for Project:		
Re-purposing Suite 30 (basement level) into a Garbage/Recycle Room f	or entire building.	
Project Manager/ Co-ordinator: Francesco loele	Phone # 51966612111X80569 Cell # +1 (519) 709-5336	
- C	Elient Contact: Phone #	
Signature/ Stamp: Francesco loele 2017.06.16 09:00:55 -04'00'		
Designer Consultant:		
OF A CONOTRUCTION CARE DEMANDOS		
Contractor: SEM CONSTRUCTION - GABE DEMARCO	Cell # +1 (519) 617-0044	
Emergency Phone List: (to CCPS Only)	☐ To Follow	
Special Conditions (Noise, Odors, Asbestos, Etc.)		
☐ Asbestos ☐ Type 3 ☐ Type 2 ☐ Type 1 ☐ Contractor ☐ In House Team ☐ Other		
Information Sheet Sent To Client		
Comments:		
Shutdowns/Interruptions(Approximate Schedule):		
Electrical Power Date: Elevat	Ors	
Domestic Water Date: Fire A		
	d Water Date:	
Hot Water Heating Date: Roads	/ Lots Date:	
Issued By:	Date:	
APPROVED		
Signature/ By Dara Gomez at 3:58 pm, Jul 25	5, 2017 Date:	
Stamp:		
Note:		