

Notice of Service Interruption/Area Closure Western University Facilities Management

Client Services 519-661-3304 (fmhelp@uwo.ca)

1

| UNIVERSITY - CANADA | | | Sub | mit by E-r | mail Print Form |
|---|-------------------|----------------------|------------------|------------|------------------|
| Date of Interruption/Closure Dec 15, 2014 | | Time(s): 10:00 | 0am - 3:00pm | | |
| Building(s) #1 Beaver Hall Residence Affected: #3 Areas/Rooms Affected Alternate Route/Servic | e: | #2 #4 | | | |
| All rooms. | | | | | |
| Service to be interrupted: #1 Domestic Hot Water #2 #3 #4 Description/Reason for Project: #4 Leak on recirc main inside unit 279L. #4 | | | | | |
| | | | | | |
| Requester: JP Laporte | | | Date of Request: | | |
| Supervising Tradesperson: P Dearing Unit: Plumbing | | | | | |
| Trade Supervisor: Carmen Bertone Unit: Plumbing Date:Dec 9, 2014 | | | | | Date:Dec 9, 2014 |
| Contractor: Phone # Coordinator/Project Manager: Phone # | | | | | |
| Reviewed by Trade Supervisor(s)/Shop(s) Affected: | | | | | |
| Name: Plumber / Fitter Shop | Date: Dec 9, 2014 | Name: | | | Date: |
| Signature/ Stamp: | | Signature/ Stamp: | | | |
| Reviewed by: Principal Occupants: | | | | | |
| Name: | Date: | Name: | | Ext. | Date: |
| Signature/ | | Name: | | Ext. | Date: |
| Stamp: | | Name: Name: | | Ext. | Date: |
| Approval to Proceed: Date: | App | proval to Proceed: | Date: | | |
| APPROVED By Dan Trudgeon (fminterr@uwo.ca) at 8:39 am, Dec 10, 2014 | | | | | |
| Notes: JP already discussed with Glenmore I | Housing Office | | | | |