



**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:  
 All rooms with fume hoods.  
 All systems will still be running (e.g., exhaust fans, cooling towers, etc.) for capturing the noise measurements.  
 Fume hoods cannot be used during these times and all substances should be removed from them in advance.

Service to be interrupted: #1  #2   
 #3  #4

Description/Reason for Project:  
 Environmental Consultant taking measurements on rooftop equipment for a submission to the Ministry of the Environment and Climate Change.

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: <input type="text" value="Electrical / Mechanical Shop"/>	Date: <input type="text" value="Aug 12, 2015"/>	Name: <input type="text" value="WES Control"/>	Date: <input type="text" value="Aug 12, 2015"/>
Signature/Stamp: <input type="text" value="APPROVED"/> <small>By Steve Pepper (spepper@uwo.ca) at 3:16 pm, Aug 12, 2015</small>		Signature/Stamp: <input type="text" value="REVIEWED"/> <small>By Jesse Atkinson (jatkin48@uwo.ca) at 7:03 am, Aug 13, 2015</small>	
Name: <input type="text"/>	Date: <input type="text"/>	Principal Occupants:	
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"/>	Name: <input type="text"/>	Ext. <input type="text"/>
Signature/Stamp: <input type="text"/>		Approval to Proceed: <input type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>	Date: <input type="text"/>	
Signature/Stamp: <input type="text"/>		Signature/Stamp: <input type="text" value="APPROVED"/> <small>By Dan Trudgeon (fminterr@uwo.ca) at 2:22 pm, Aug 13, 2015</small>	

Notes: