



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: 10/4/14 - 10/30/14	Time(s): MONTH OF OCTOBER
--	---------------------------

Building(s) Affected: #1 CHILLER PLANT NORTH #2
 #3 #4
 Areas/Rooms Affected Alternate Route/Service:
 ALL CHILLERS IN THE NORTH END PLANT WILL BE OFF LINE

Service to be interrupted: #1 Chilled Water #2
 #3 #4
 Description/Reason for Project:
 EAST SUB STATION MAINTENANCE

Requester: Doug Johnson Date of Request:

Supervising Tradesperson: MARK WIDMEYER Unit:

Trade Supervisor: Doug Johnson Unit: Date:

Contractor: Phone #:

Coordinator/Project Manager: MARK WIDMEYER Phone #: Date:

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

Name: Power Plant	Date:	Name: WES	Date:
-------------------	-------	-----------	-------

Signature/Stamp: REVIEWED <small>By Mike Herman (mrherman@uwo.ca) at 10:35 am, Sep 29, 2014</small>	Signature/Stamp: REVIEWED <small>By Wayne Drummond (ppdwad@uwo.ca) at 10:19 am, Sep 29, 2014</small>
---	--

Reviewed by: Name: ACMF Date: <input type="text"/> Signature/Stamp: RECEIVED <small>By ken hill (kenhill@uwo.ca) at 10:49 am, Sep 29, 2014</small>	Principal Occupants: <table border="1" style="width:100%"> <tr> <td>Name:</td> <td>Ext.:</td> <td>Date:</td> </tr> <tr> <td>Name:</td> <td>Ext.:</td> <td>Date:</td> </tr> <tr> <td>Name:</td> <td>Ext.:</td> <td>Date:</td> </tr> <tr> <td>Name:</td> <td>Ext.:</td> <td>Date:</td> </tr> </table>	Name:	Ext.:	Date:	Name:	Ext.:	Date:	Name:	Ext.:	Date:	Name:	Ext.:	Date:
Name:	Ext.:	Date:											
Name:	Ext.:	Date:											
Name:	Ext.:	Date:											
Name:	Ext.:	Date:											

Approval to Proceed: Date: <input type="text"/>	Approval to Proceed: Date: <input type="text"/>

Notes: THERE WILL LIMITED POWER IN THE NORTH END OF THE CAMPUS CHILLERS WILL NEED TO BE OFF