



**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:  Date:  Name:  Date:

Signature/Stamp: 

Signature/Stamp: **REVIEWED**  
 By Wayne Drummond (ppdwad@uwo.ca) at 7:14 am, Mar 22, 2017

Name:  Date:

**Principal Occupants:**

Signature/Stamp:

Name:  Ext.  Date:

Name:  Date:

Name:  Ext.  Date:

Signature/Stamp:

Name:  Ext.  Date:

Name:  Date:

Name:  Ext.  Date:

Signature/Stamp:

Approval to Proceed:  Date:

**APPROVED**  
 By Andrew Merucci (amerucci@uwo.ca) at 1:22 pm, Mar 22, 2017

Notes: