



**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 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="Sep 25, 2015"/>	Name: <input type="text" value="WES Control"/>	Date: <input type="text" value="Sep 25, 2015"/>
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Signature/Stamp: <input type="text" value="APPROVED"/> <small>By Steve Pepper (spepper@uwo.ca) at 3:31 pm, Sep 25, 2015</small>	Signature/Stamp: <input type="text" value="REVIEWED"/> <small>By Wayne Drummond (ppdwad@uwo.ca) at 10:14 am, Sep 28, 2015</small>
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Name: <input type="text" value="Fire Safety"/>	Date: <input type="text" value="Sep 25, 2015"/>
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Signature/Stamp: <input type="text" value="REVIEWED"/> <small>By Jenn Romyn (jromyn2@uwo.ca) at 1:12 pm, Sep 28, 2015</small>	Principal Occupants:		
Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>	
Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>	

Name: <input type="text" value="Electrical Shop"/>	Date: <input type="text" value="Sep 25, 2015"/>	Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>
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Signature/Stamp: <input type="text" value="Muel Wilmans"/>	Approval to Proceed: <input type="text"/>			Date: <input type="text"/>
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Name: <input type="text"/>	Date: <input type="text"/>	<input type="text" value="APPROVED"/> <small>By Dan Trudgeon (fminterr@uwo.ca) at 7:31 am, Sep 30, 2015</small>
Signature/Stamp: <input type="text"/>		

Notes: