

## Notice of Service Interruption/Area Closure Western University Facilities Management

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

UNIVERSITY · C /	A N A D A		REV					Sub	omit by E-n	naii	Print Form
				m, Sep 02, 2014		_					
Date of Interruption/Closure Friday, September 5, 2014					Т	ime(s):	6:00	AM - 10:00AM	- 10:00AM		
Building(s)	#1 Dental Scien	ces Building				#2 [					
Affected:	#3	( <b>D</b> ( 10				#4					
Areas/Rooms Affected Alternate Route/Service: Fans 101, 102, 103, 104 & 113 will be shut off for work in ground floor ceiling spaces.											
Medical air system service to whole building.											
Service to b	e #1 HVAC fans	101, 102, 103, 104	4 & 113	(		#2 M	edical	Air Shutdown			
interrupted	Service to be interrupted: #1 HVAC fans 101, 102, 103, 104 & 113 #2 Medical Air Shutdown   #3 #4										
	Reason for Proje										
Ceiling acc	ess required for c	onnections to o	dental (mo	edical) air s	systen	n.					
Requester	Besterd Mechan	:						Date of Request:	Aug 27, 20	14	
								Date of Request	Aug 27, 20	14	
Supervisin	g Tradesperson					Unit:					
Trade Sup	ervisor:					Unit:				Date:	
Contractor: Besterd Mechanical - Rob Littlechild							Phone # +1 (519) 639-1204				
Contractor	Besterd Mechani	ical - Rob Littlechi	ld				Phon	e # +1 (519) 639-12	204		
	: Besterd Mechani Project Manager: M		ld					e # +1 (519) 639-12 e # 88737	204	Date:A	ug 27, 2014
Coordinator/I		ike DeJager							204	Date:A	ug 27, 2014
Coordinator/I	Project Manager: M	ike DeJager )/Shop(s) Affecte		Aug 27, 20	)14	Name:			204		e: Aug 27, 2014
Coordinator/I Reviewed by Name:	Project Manager: Mi Trade Supervisor(s) Motor Sh	ike DeJager )/Shop(s) Affecte nop	d: Date:	Aug 27, 20	014		Phor	e # 88737			
Coordinator/I Reviewed by	Project Manager: M Trade Supervisor(s)	ike DeJager )/Shop(s) Affecte nop	d: Date:	Aug 27, 20	)14	Name: Signature Stamp:	Phor	e # 88737 WES Control	)	Date	e: Aug 27, 2014
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