



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:	Date:	Name:	Date:
Signature/Stamp:		Signature/Stamp:	
Name:	Date:	Principal Occupants:	
Signature/Stamp:		Name: Kevin Inchley	Ext. Date:
Name:	Date:	Name:	Ext. Date:
Signature/Stamp:		Name:	Ext. Date:
Name:	Date:	Name:	Ext. Date:
Signature/Stamp:		Approval to Proceed: <input type="text"/> Date: <input type="text"/>	
Name:	Date:	<div style="border: 2px solid green; padding: 5px; text-align: center;"> APPROVED <i>By Dan Trudgeon at 11:54 am, Dec 14, 2015</i> </div>	
Signature/Stamp:			

Notes:

Location of Type 2 Enclosure

Area of Room and Hallway Closure

