



**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:

**REVIEWED**

*By Heather Zavitz (hzavitz@uwo.ca) at 7:40 am, Oct 31, 2016*

Signature/  
Stamp:

**REVIEWED**

*By Frank (ffaroni@uwo.ca) at 11:57 am, Oct 28, 2016*

Name:

Date:

Signature/  
Stamp:

Name:

Date:

Signature/  
Stamp:

Name:

Date:

Signature/  
Stamp:

Principal Occupants:

Name:

Ext.

Date:

Name:

Ext.

Date:

Name:

Ext.

Date:

Name:

Ext.

Date:

Approval to Proceed:

Date:

**APPROVED**

*By Dan Trudgeon (dtrudgeo@uwo.ca) at 2:16 pm, Oct 31, 2016*

Notes: