

## 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 Aug 10, 2017  Time(s): 7:00am - 12:00pm  |               |  |                                      |               |       |
|---|---------------|--|--------------------------------------|---------------|-------|
| Building(s) #1 Dental Science Building (DSB) #2 Affected:  #3 #4 Areas/Rooms Affected Alternate Route/Service:  Autoclaves rooms 0142X except autoclave #6 and 0142T. |               |  |                                      |               |       |
| Service to be #1 Steam #2   |               |  |                                      |               |       |
| interrupted: #3 #4 Description/Reason for Project:  Repair leaking steam line.  |               |  |                                      |               |       |
| Requester: Jason Watkin   |               |  | Date of Reque                        | st: Aug 3, 20 | 017   |
| Supervising Tradesperson: Jason Watkin Unit: Steamfitter  |               |  |                                      |               |       |
| Trade Manager: Dan Gyetvai Unit   |               |  | Plumber/Fitter Shop Date:Aug 3, 2017 |               |       |
| Contractor:   |               |  | Phone #                              |               |       |
| Coordinator/Project Manager: Phone # Date:  |               |  |                                      |               |       |
| Reviewed by Trade Manager(s)/Shop(s) Affected:  |               |  |                                      |               |       |
| Name:   | Date:         | Name:  |                                      |               | Date: |
| Signature/<br>Stamp:  |               | Signature/<br>Stamp:                             |                                      |               |       |
| Name:   | Date:         | Principal Occupants:                             |                                      |               |       |
| Signature/  |               | Name:  | ooupunto.                            | Ext.          | Date: |
| Stamp:  |               | Name:  |                                      | Ext.          | Date: |
| Name:   | Date:         | Name:  |                                      | Ext.          | Date: |
| Signature/  |               | Name:  |                                      | Ext.          | Date: |
| Stamp:  | 1             |  | Approval to Procee                   | ed:           | Date: |
| Name: Signature/ Stamp:   | Date:         | APPROVED  By Dara Gomez at 1:52 pm, Aug 04, 2017 |                                      |               |       |
| Notes: Confirmed time with Kevin Inchely a  | nd Debra Pond |  |                                      |               |       |