



Notice of Project  
Western University  
Facilities Management  
Client Services 519-661-3304 (fmhelp@uwo.ca)

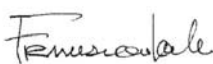
Submit by E-mail

Print Form

Project Number: 9AES83	<input type="checkbox"/> Miniature Attached	Date/Schedule: 5/15/17 - 7/15/17
Project Name: EHR - Domestic Hot Water Boilers (2) & 3 storage tanks		Time: 7:30AM-4:30PM

Building(s) Affected:	#1 Essex Hall Residence (EHR)	#2	
	#3	#4	
Areas/Rooms Affected, Alternate Route/Service: Mechanical room/hot water to entire building.			

Service to be interrupted:	#1 Domestic Hot Water	#2	
	#3	#4	
Description/Reason for Project: NEW BOILERS			

Project Manager/ Co-ordinator:	FRANCESCO IOELE	Phone #	X80569	Cell #	+1 (519) 709-5336
Signature/ Stamp:	 Francesco Ioele 2017.05.04 10:17:12 -04'00'	Client Contact:	Chris Bumbacco	Phone #	x86614
		Designer Consultant:	EXP. Joe Claessens		

Contractor:	Besterd mechanical - jeff tubman	Cell #	+1 (519) 639-1424
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Emergency Phone List: (to CCPS Only)	<input type="checkbox"/> Attached	<input type="checkbox"/> To Follow
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Special Conditions ( Noise, Odors, Asbestos, Etc.)
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<input type="checkbox"/> Asbestos	<input type="checkbox"/> Type 3	<input type="checkbox"/> Type 2	<input type="checkbox"/> Type 1	<input type="checkbox"/> Contractor	<input type="checkbox"/> In House Team	<input type="checkbox"/> Other
<input type="checkbox"/> Information Sheet Sent To Client						

Comments:
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Shutdowns/Interruptions(Approximate Schedule):					
Electrical Power	<input type="checkbox"/>	Date: _____	Elevators	<input type="checkbox"/>	Date: _____ ITS
Domestic Water	<input type="checkbox"/>	Date: _____	Fire Alarms	<input type="checkbox"/>	Date: _____ Other
Steam	<input type="checkbox"/>	Date: _____	Chilled Water	<input type="checkbox"/>	Date: _____
Hot Water Heating	<input checked="" type="checkbox"/>	Date: TBD	Roads / Lots	<input type="checkbox"/>	Date: _____

Issued By:	<b>APPROVED</b>	Date:	
Signature/ Stamp:	By Dan Trudgeon at 10:24 am, May 08, 2017	Date:	

Note:
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