



Western UNIVERSITY • CANADA

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	<input type="text" value="Feb 20, 2014"/>	Time(s):	<input type="text" value="10:00 am - 2:00 pm"/>
------------------------------	---	----------	---

Building(s) Affected:	#1 <input type="text" value="Elgin Hall Residence"/>	#2 <input type="text"/>
	#3 <input type="text"/>	#4 <input type="text"/>

Areas/Rooms Affected Alternate Route/Service:

Service to be interrupted:	#1 <input type="text" value="Domestic Hot Water"/>	#2 <input type="text"/>
	#3 <input type="text"/>	#4 <input type="text"/>

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: <input type="text" value="Plumber Fitter Shop"/>	Date: <input type="text" value="Feb 10, 2014"/>	Name: <input type="text" value="Mary Stiles/Val Dukeshire"/>	Date: <input type="text"/>
--	---	--	----------------------------

Signature/Stamp:

Signature/Stamp: **APPROVED**
By Val (vjdukesh@uwo.ca) at 11:45 am, Feb 10, 2014

Reviewed by:

Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: <input type="text"/>	

Principal Occupants:

Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>
Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>
Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>
Name: <input type="text"/>	Ext. <input type="text"/>	Date: <input type="text"/>

Approval to Proceed: Date: Approval to Proceed: Date:

APPROVED
By Andrew (amerucci@uwo.ca) at 3:45 pm, Feb 10, 2014

Notes: