



Western UNIVERSITY • CANADA

Notice of Service Interruption/Area Closure  
Western University  
Facilities Management

Service Centre 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail

Print Form

Date of Interruption/Closure	<input type="text" value="Jun 25, 2014"/>	Time(s):	<input type="text" value="8:30 am -4:00 pm"/>
------------------------------	---	----------	---

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

Areas/Rooms Affected Alternate Route/Service:

Service to be interrupted:	#1 <input type="text" value="Exhaust Fans"/>	#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="Electrical Mechanical Shop"/>	Date: <input type="text" value="Jun 2, 2014"/>	Name: <input type="text" value="Jerry Minler"/>	Date: <input type="text"/>
---	--	---	----------------------------

Signature/Stamp:	Signature/Stamp: <b>APPROVED</b>
------------------	----------------------------------

Reviewed by:	Principal Occupants:
Name: <input type="text"/>	Name: <input type="text"/>
Date: <input type="text"/>	Ext.: <input type="text"/>
Signature/Stamp: <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 10:57 am, Jun 04, 2014

Notes: