



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="10/27/14 - indefinite"/>	Time(s): <input type="text"/>
--	-------------------------------

Building(s) Affected: #1 #2
 #3 #4

Areas/Rooms Affected Alternate Route/Service:
 LHSB - Access to fuel pump is posted on temporary construction fence. To access pump, take temporary access road toward heating plant. Open fence at posted location, drive to pump, fuel up, drive out. Please be sure to close fence when finished.

Service to be interrupted: #1 #2
 #3 #4

Description/Reason for Project:
 Fuel tank will be emptied by regular use, then decommissioned and taken out of service permanently (approx 2 weeks supply max). New fueling station to be installed at SSB loading dock, anticipated completion approximately 8 weeks. Alternate means for fueling vehicles to be taken in the interim.

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"/>	Stores: <input type="text"/>	Date: <input type="text" value="Oct 15, 2014"/>	Name: <input type="text"/>	Date: <input type="text"/>
----------------------------	------------------------------	---	----------------------------	----------------------------

Signature/Stamp: REVIEWED <small>By Dan Trudgeon (fminterr@uwo.ca) at 8:35 am, Oct 16, 2014</small>	Signature/Stamp:
---	------------------

Reviewed by: Name: <input type="text" value="Jeff Jones"/> Date: <input type="text" value="Oct 15, 2014"/> Signature/Stamp:	Principal Occupants: <table border="1" style="width:100%"> <tr><td>Name: <input type="text"/></td><td>Ext.:</td><td>Date:</td></tr> <tr><td>Name: <input type="text"/></td><td>Ext.:</td><td>Date:</td></tr> <tr><td>Name: <input type="text"/></td><td>Ext.:</td><td>Date:</td></tr> <tr><td>Name: <input type="text"/></td><td>Ext.:</td><td>Date:</td></tr> </table>	Name: <input type="text"/>	Ext.:	Date:	Name: <input type="text"/>	Ext.:	Date:	Name: <input type="text"/>	Ext.:	Date:	Name: <input type="text"/>	Ext.:	Date:
Name: <input type="text"/>	Ext.:	Date:											
Name: <input type="text"/>	Ext.:	Date:											
Name: <input type="text"/>	Ext.:	Date:											
Name: <input type="text"/>	Ext.:	Date:											

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

APPROVED

By Dan Trudgeon (fminterr@uwo.ca) at 8:35 am, Oct 16, 2014

Notes: