



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: Time(s):

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

Areas/Rooms Affected Alternate Route/Service:

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

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: Plumber / Fitter Shop	Date: Nov 25, 2014	Name: WES Control	Date: Nov 25, 2014
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Signature/Stamp: **APPROVED**
By Carmen Bertone (cbertone@uwo.ca) at 7:42 am, Nov 25, 2014

Signature/Stamp: **REVIEWED**
By Wayne Drummond (ppdwad@uwo.ca) at 8:13 am, Nov 25, 2014

Name: Date:

Principal Occupants:

Signature/Stamp:

Name:	Ext.:	Date:
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Signature/Stamp:

Name:	Ext.:	Date:
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Name: Date:

Name:	Ext.:	Date:
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Signature/Stamp:

Name:	Ext.:	Date:
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Name: Date:

Approval to Proceed: Date:

Name: Date:

APPROVED
By Dan Trudgeon (fminterr@uwo.ca) at 8:26 am, Nov 25, 2014

Signature/Stamp:

Notes: