



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 Manager: Unit: Date:

Contractor: Phone #
 Coordinator/Project Manager: Phone # Date:

Reviewed by Trade Manager(s)/Shop(s) Affected:

Name: <input type="text" value="Electrical Shop"/>	Date: <input type="text"/>	Name: <input type="text" value="Fire Safety"/>	Date: <input type="text"/>
Signature/Stamp:		Signature/Stamp:	
Name: <input type="text"/>	Date: <input type="text"/>	Principal Occupants:	
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/> Date: <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/> Date: <input type="text"/>
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/> Date: <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/> Date: <input type="text"/>
Signature/Stamp: <input type="text"/>		Approval to Proceed: <input type="text"/> Date: <input type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>		
Signature/Stamp: <input type="text"/>			

Notes: FCFP would like to know if the sprinklers in the area under construction can be capped-off at the time the system is turned down Monday May 28, 2018 so that it doesn't have to be drained daily. Then on Thursday May 31st, uncap the system in the construction zone and turn it back on.
 Assistance required to by-pass flow switches the morning of the May 28 shutdown and the afternoon of May 31 start-up

Sprinkler.

