



**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:

ENTIRE BUILDING

Service to be interrupted: #1  #2

#3  #4

Description/Reason for Project:

To test fire alarm voice paging system

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:

Date:

Signature/  
Stamp:

*Heather Zavitz*

Signature/  
Stamp:

Name:

Date:

Signature/  
Stamp:

Name:

Date:

Signature/  
Stamp:

Name:

Date:

Signature/  
Stamp:

Principal Occupants:

Name:

Ext.

Date:

Name:

Ext.

Date:

Name:

Ext.

Date:

Name:

Ext.

Date:

Approval to Proceed:

Date:

**APPROVED**

By Andrew Merucci at 3:36 pm, Mar 16, 2017

Notes: