



**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" value="Dec 15, 2017"/>	Name: <input type="text"/>	Date: <input type="text" value="Dec 15, 2017"/>
--	---	----------------------------	---

Signature/Stamp:

Signature/Stamp:

Name: Date:

Principal Occupants:

Signature/Stamp:

Name: Megan Clements	Ext.	Date:
Name:	Ext.	Date:
Name:	Ext.	Date:
Name:	Ext.	Date:

Name: Date:

Signature/Stamp:

Approval to Proceed: Date:

Name: Date:

Signature/Stamp:

Notes: