



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: <input type="text" value="Electrical / Mechanical Shop"/>	Date: <input type="text" value="Oct 26, 2015"/>	Name: <input type="text" value="WES Control"/>	Date: <input type="text" value="Oct 26, 2015"/>
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Signature/Stamp: **APPROVED**
 By Scott Parker (sparker9@uwo.ca) at 3:49 pm, Oct 26, 2015

Signature/Stamp: **REVIEWED**
 By Jesse Atkinson (jatkin48@uwo.ca) at 8:32 am, Oct 26, 2015

Name: Date:

Signature/Stamp: **REVIEWED**
 By Frank (ffaroni@uwo.ca) at 8:57 am, Oct 26, 2015

Principal Occupants:

Name:	Ext.	Date:
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name: Date:

Signature/Stamp:

Name: Date:

Signature/Stamp:

Approval to Proceed: Date:

APPROVED
 By Dan Trudgeon (fminterr@uwo.ca) at 8:17 am, Oct 27, 2015

Notes: