



**Notice of Project
Western University
Facilities Management
Client Services 519-661-3304 (fmhelp@uwo.ca)**

Submit by E-mail

Print Form

REVISED
11:41 am, Apr 20, 2018

Project Number: Miniature Attached Date/Schedule:
 Project Name: Time:

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

Areas/Rooms Affected, Alternate Route/Service:
 The entire building will be assessed, including the exterior, roof, mechanical rooms, electrical rooms, washrooms, classrooms, labs, office and general use spaces. Pending the availability of the spaces, no disruptions are currently planned. The assessment is visual and involves photos being taken by the Assessors.

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

Description/Reason for Project:
 This building condition assessment is part of an Ontario Government mandated program for all Ontario Universities.

Project Manager/Co-ordinator: Phone # Cell #
 Signature/Stamp: Client Contact: Phone #
 Designer Consultant:

Contractor: Cell #

Emergency Phone List: (to CCPS Only) Attached To Follow

Special Conditions (Noise, Odors, Asbestos, Etc.)

Asbestos Type 3 Type 2 Type 1 Contractor In House Team Other
 Information Sheet Sent To Client

Comments:

Shutdowns/Interruptions(Approximate Schedule):
 Electrical Power Date: _____ Elevators Date: _____ ITS Date: _____
 Domestic Water Date: _____ Fire Alarms Date: _____ Other Date: _____
 Steam Date: _____ Chilled Water Date: _____
 Hot Water Heating Date: _____ Roads / Lots Date: _____

Issued By: Date:
 Signature/Stamp: Date:

Note: