



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 buildings

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="Plumber / Fitter Shop"/>	Date: <input type="text"/>	Name: <input type="text" value="WES Control"/>	Date: <input type="text"/>
Signature/Stamp: REVIEWED <i>By Dan Gyetvai (dgyetvai@uwo.ca) at 11:19 am, Sep 18, 2017</i>		Signature/Stamp: REVIEWED <i>By Wayne Drummond (ppdwad@uwo.ca) at 11:08 am, Sep 18, 2017</i>	
Name: <input type="text" value="Plant Operations"/>	Date: <input type="text"/>	Principal Occupants:	
Signature/Stamp: REVIEWED <i>By Mike Herman (mrherman@uwo.ca) at 12:34 pm, Sep 19, 2017</i>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Date: <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: <input type="text"/>		Approval to Proceed: <input type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>	APPROVED <i>By Dan Trudgeon (dtrudgeon@uwo.ca) at 3:51 pm, Sep 20, 2017</i>	
Signature/Stamp: <input type="text"/>			

Notes: