



**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: <input type="text" value="Sept. 26-Sept. 30, 2016"/>	Time(s): <input type="text" value="8:00AM-4:30PM"/>
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**Building(s) Affected:**

#1 <input type="text" value="PHYSICS &amp; ASTRONOMY BLDG (PAB)"/>	#2 <input type="text"/>
#3 <input type="text"/>	#4 <input type="text"/>

**Areas/Rooms Affected Alternate Route/Service:**

**Service to be interrupted:**

#1 <input type="text" value="Fire Alarm Device Test"/>	#2 <input type="text"/>
#3 <input type="text"/>	#4 <input type="text"/>

**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"/>	Name: <input type="text"/>
Date: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: <input type="text"/>	Signature/Stamp: <input type="text"/>

**Principal Occupants:**

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

**Approval to Proceed:**  **Date:**

**APPROVED**  
 By Andrew Merucci at 11:48 am, Sep 26, 2016

**Notes:**