

## Notice of Service Interruption/Area Closure Western University Facilities Management

Client Services 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail
Print Form

Building(s) #1							
Affected: #3  Areas/Rooms Affected Alternate Route/Service: Room 14 ,15 ,16. Nanotech lab.  Service to be interrupted: #3  Description/Reason for Project:  Control panel upgrade.  Requester: Doug Johnson  Date of Request: Feb 13, 2017  Supervising Tradesperson: Andrew Flegel  Unit: Date:  Contractor: Phone #  Phone #  Phone #  Date: Peb 13, 2017  Signature/ Stamp: Signature/ Stamp: Principal Occupants:  Signature/ Stamp: Date: Principal Occupants:  Name: Ext. Date: Name: Date: Date: Date: Name: Date: Date: Date: Name: Date: D	Date of Interruption/Closure Feb 15, 2017 Time(s): 7:00am - 8:00am						
Service to be #1   HVAC Systems   #2	Affected: #3 #4 Areas/Rooms Affected Alternate Route/Service:						
interrupted: #3  Description/Reason for Project:  Control panel upgrade.  Requester: Doug Johnson  Supervising Tradesperson: Andrew Flegel Unit: Date:  Contractor: Doug Johnson Unit: Date:  Coordinator/Project Manager: Doug Johnson  Coordinator/Project Manager: Phone #  Reviewed by Trade Manager(s)/Shop(s) Affected:  Name: Electrical / Mechanical Shop Date: Feb 13, 2017  Name: WES Control Date: Feb 13, 2017  Signature/ Stamp: Principal Occupants:  Name: Ext. Date:  Name: Date:  Name: Date: Date:  Name: Date: Date:  Approval to Proceed: Date:  Signature/ Stamp:  Name: Date: Date:  Name: Date: Date:  Approval to Proceed: Date:  Signature/ Stamp:  Name: Date: Date:  Name: Date: Date:  Approval to Proceed: Date:  Date: D							
Requester: Doug Johnson  Date of Request: Feb 13, 2017  Supervising Tradesperson: Andrew Flegel Unit: Trade Manager: Doug Johnson Unit: Date:  Contractor: Phone #  Coordinator/Project Manager: Phone #  Reviewed by Trade Manager(s)/Shop(s) Affected:  Name: Electrical / Mechanical Shop Date: Feb 13, 2017 Name: WES Control Date: Feb 13, 2017  Signature/ Stamp: Signature/ Stamp: Principal Occupants:  Signature/ Stamp: Name: Ext. Date: Name: Ext. Da	interrupted: #3 #4						
Supervising Tradesperson: Andrew Flegel  Trade Manager: Doug Johnson  Unit: Date:  Contractor: Phone #  Coordinator/Project Manager: Phone #  Reviewed by Trade Manager(s)/Shop(s) Affected:  Name: Electrical / Mechanical Shop Date: Feb 13, 2017 Name: WES Control Date: Feb 13, 2017  Signature/ Stamp: Signature/ Stamp: Principal Occupants:  Name: Date: Principal Occupants:  Name: Ext. Date: Name:	Control panel upgrade.						
Trade Manager: Doug Johnson  Unit: Date:  Contractor: Phone # Date:  Coordinator/Project Manager: Phone # Date:  Reviewed by Trade Manager(s)/Shop(s) Affected:  Name: Electrical / Mechanical Shop Date: Feb 13, 2017 Name: WES Control Date: Feb 13, 2017 Signature/ Stamp: Principal Occupants:  Name: Principal Occupants:  Name: Ext. Date: Name: Ext	Requester: Doug Johnson Date of Request: Feb 13, 2017						
Contractor:  Coordinator/Project Manager:  Reviewed by Trade Manager(s)/Shop(s) Affected:  Name: Electrical / Mechanical Shop Date: Feb 13, 2017 Name: WES Control Date: Feb 13, 2017  Signature/ Stamp:  APPROVED Stamp:  Principal Occupants:  Signature/ Stamp:  Name: Ext. Date:  Signature/ Stamp:  Name: Date:  Signature/ Stamp:  Approval to Proceed: Date:	Supervising Tradesperson: Andrew Flegel Unit:						
Coordinator/Project Manager:  Reviewed by Trade Manager(s)/Shop(s) Affected:  Name: Electrical / Mechanical Shop Date: Feb 13, 2017 Name: WES Control Date: Feb 13, 2017  Signature/ Stamp: By Sepaper (speeper Burocca) at 9:30 am, Feb 13, 2017  Name: Principal Occupants:  Signature/ Stamp: Name: Ext. Date:  Name: Date:  Name: Date:  Signature/ Stamp: Date:  Name: Obate:  Name: Date:  Name: Obate:  Name: Obate: Obate:  Name: Obate: Obate:  Name: Obate: Obat	Trade Manager: Doug Johnson Unit: Date:						
Name: Electrical / Mechanical Shop Date: Feb 13, 2017  Signature/ Stamp: Signature Stamp: Signature Stamp: By spepper (speepper @uwo.ca) at 9:30 am, Feb 13, 2017  Name: Principal Occupants:  Name: Ext. Date: Ext. Date: Name: Ext. Date: Ext. Date: Name: Ext. Date: Ext. Date							
Signature/ Stamp:    APPROVED   Stamp:   Signature   Stamp:   Stam	Reviewed by Trade Manager(s)/Shop(s) Affected:						
Stamp:    Stamp:   By Wayne Drummond (ppdwad@uwo.ca) at 9:06 am, Feb 13, 2017	Name: Electrical / Mechanical Shop	Date: Feb 13, 2017	7 Name:	WES Control	Da	te: Feb 13, 2017	
Name:  Signature/ Stamp:  Name:  Date:  Name:  Name:  Ext. Date:  Name:  Ext. Date:  Name:  Name:  Ext. Date:  Name:  Approval to Proceed:  Date:  Name:  Signature/ Stamp:  Date:  Approval to Proceed:  Date:  Approval to Proceed:  By Dan Trudgeon (dtrudgeo @uwo.ca) at 11:44 am, Feb 13, 2017		Signature		ea) at 9:06 am, Feb 13, 2017			
Stamp:  Name:  Date:  Name:  Signature/ Stamp:  Name:  Date:  Approval to Proceed:  Approval to Proceed:  Date:  Approval to Proceed:	Name: Date:		Principal O	Principal Occupants:			
Name:    Date:   Name:   Ext.   Date:			Name:		Ext.	Date:	
Signature/ Stamp:  Name:  Approval to Proceed:  Date:  APPROVED  By Dan Trudgeon (dtrudgeo@uwo.ca) at 11:44 am, Feb 13, 2017	Stamp:						
Signature/ Stamp:  Name:  Date:  Approval to Proceed:  APPROVED  By Dan Trudgeon (dtrudgeo@uwo.ca) at 11:44 am, Feb 13, 2017	Name:	Date:					
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