



**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="May 31, 2016"/>	Time(s): <input type="text" value="7:00am - 4:00pm"/>
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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="WES"/> Date: <input type="text"/> Signature/Stamp: <b>REVIEWED</b> <small>By Wayne Drummond (ppdwad@uwo.ca) at 8:41 am, May 17, 2016</small>	Name: <input type="text" value="Plumber Fitter Shop"/> Date: <input type="text"/> Signature/Stamp: <b>APPROVED</b>												
Name: <input type="text"/> Date: <input type="text"/> Signature/Stamp: <input type="text"/>	Principal Occupants: <table border="1" style="width:100%"> <tr><td>Name: <input type="text"/></td><td>Ext. <input type="text"/></td><td>Date: <input type="text"/></td></tr> <tr><td>Name: <input type="text"/></td><td>Ext. <input type="text"/></td><td>Date: <input type="text"/></td></tr> <tr><td>Name: <input type="text"/></td><td>Ext. <input type="text"/></td><td>Date: <input type="text"/></td></tr> <tr><td>Name: <input type="text"/></td><td>Ext. <input type="text"/></td><td>Date: <input type="text"/></td></tr> </table>	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"/>
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Name: <input type="text"/> Date: <input type="text"/> Signature/Stamp: <input type="text"/>	Approval to Proceed: <input type="text"/> Date: <input type="text"/> <b>APPROVED</b> <small>By Dan Trudgeon (dtrudgeo@uwo.ca) at 7:35 am, May 20, 2016</small>												
Name: <input type="text"/> Date: <input type="text"/> Signature/Stamp: <input type="text"/>													

Notes: