

## Notice of Project The University of Western Ontario Facilities Management Service Centre 519-661-3304 (ppdhelp@uwo.ca)

Submit by Email

Print Form

Project Number: Miniature Attached	Expected 12/21/12 01/5/14
Project Name: Somerville House Walk-In Fridge Mould Abatement/ Demolition	Schedule Date: 12/21/13 - 01/5/14
Puilding(a) #4 O	142
Building(s) #1 Somerville House Affected:	#2
#3	#4
Areas/Rooms Affected Alternate Route/Service:  1331, 1331A, 1331A.1	
Coming to be #4	
Service to be #1 interrupted:	#2
#3	#4
Description/ Reason for Project:  Somerville House Walk-In Fridge Mould Abatement/Demolition	
Project Manager/ Co-ordinator:  MIKE MCLEAN/FRANCESCO IOELE	Phone # 88778/80569
	Diam'r
2013.12.19 14:49:36	Client Contact: Phone #
	Designer Consultant:
Contractor: SMITH CONSTRUCTION	Cell # +1 (519) 777-0716
Emergency Phone List: (to UPD Only)  Attached  To Follow	
Emergency Phone List: (to UPD Only)	☐ To Follow
Emergency Phone List: (to UPD Only)  Attached Special Conditions ( Noise, Odors, Asbestos, Etc.)	☐ To Follow
	☐ To Follow
Special Conditions ( Noise, Odors, Asbestos, Etc.)	
	☐ To Follow ☐ Contractor ☐ In House Team ☐ Other
Special Conditions ( Noise, Odors, Asbestos, Etc.)  Asbestos Type 3 Type 2 Type 1	
Special Conditions ( Noise, Odors, Asbestos, Etc.)  Asbestos Type 3 Type 2 Type 1 Information Sheet Sent To Client  Comments:	
Special Conditions ( Noise, Odors, Asbestos, Etc.)  Asbestos Type 3 Type 2 Type 1 Information Sheet Sent To Client  Comments:  Shutdowns/Interruptions(Approximate Schedule):	Contractor In House Team Other
Special Conditions ( Noise, Odors, Asbestos, Etc.)  Asbestos Type 3 Type 2 Type 1 Information Sheet Sent To Client  Comments:  Shutdowns/Interruptions(Approximate Schedule): Electrical Power Date:  Eleva	Contractor   In House Team   Other  tors   Date:   ITS   Date:
Special Conditions ( Noise, Odors, Asbestos, Etc.)  Asbestos Type 3 Type 2 Type 1 Information Sheet Sent To Client  Comments:  Shutdowns/Interruptions(Approximate Schedule): Electrical Power Date:  Date:	Contractor   In House Team   Other  tors   Date:   ITS   Date:   Date:
Special Conditions ( Noise, Odors, Asbestos, Etc.)  Asbestos Type 3 Type 2 Type 1 Information Sheet Sent To Client  Comments:  Shutdowns/Interruptions(Approximate Schedule): Electrical Power Date: Eleva  Domestic Water Date: Fire A  Steam Date: Chille	Contractor   In House Team   Other  tors   Date:   ITS   Date:   Date:
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