



Notice of Project  
Western University  
Facilities Management  
Client Services 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail

Print Form

Project Number: 9AS139	<input type="checkbox"/> Miniature Attached	Date/Schedule: 6/06/16 - 7/20/16
Project Name: 9AS139 SMHR - Drains, Sinks, Risers and Urinals II		Time: 7am - 5pm

Building(s) Affected:	#1 SAUGEEN-MAITLAND RESIDENCE (SMHR)	#2
	#3	#4
Areas/Rooms Affected, Alternate Route/Service: WASHROOMS ON 6-9TH FLOOR (SAUGEEN SIDE)		

Service to be interrupted:	#1	#2
	#3	#4
Description/Reason for Project: upgrading drains in washrooms		

Project Manager/ Co-ordinator:	Francesco Ioele	Phone #	80569	Cell #	+1 (519) 709-5336
Signature/ Stamp:	 Francesco Ioele 2016.06.01 08:59:08 -04'00'	Client Contact:		Phone #	
		Designer Consultant:			

Contractor:	SEM CONSTRUCTION	Cell #	519.614.2250
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Emergency Phone List: (to CCPS Only)	<input type="checkbox"/> Attached	<input type="checkbox"/> To Follow
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Special Conditions ( Noise, Odors, Asbestos, Etc.)
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<input type="checkbox"/> Asbestos	<input type="checkbox"/> Type 3	<input type="checkbox"/> Type 2	<input type="checkbox"/> Type 1	<input type="checkbox"/> Contractor	<input type="checkbox"/> In House Team	<input type="checkbox"/> Other
<input type="checkbox"/> Information Sheet Sent To Client						

Comments:
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Shutdowns/Interruptions(Approximate Schedule):					
Electrical Power	<input type="checkbox"/>	Date:	Elevators	<input type="checkbox"/>	Date:
Domestic Water	<input type="checkbox"/>	Date:	Fire Alarms	<input type="checkbox"/>	Date:
Steam	<input type="checkbox"/>	Date:	Chilled Water	<input type="checkbox"/>	Date:
Hot Water Heating	<input type="checkbox"/>	Date:	Roads / Lots	<input type="checkbox"/>	Date:
			ITS	<input type="checkbox"/>	Date:
			Other	<input type="checkbox"/>	Date:

Issued By:		Date:	
Signature/ Stamp:	<div>APPROVED By Justin DeGurse at 9:24 am, Jun 02, 2016</div>	Date:	

Note:
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