



**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:  Time(s):

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: <b>Plumber Fitter Shop</b>	Date: <b>Sep 3, 2015</b>	Name: <b>Housing</b>	Date: <b>Sep 4, 2015</b>
Signature/Stamp:		Signature/Stamp: <b>APPROVED</b>	
Name: _____	Date: _____	<b>Principal Occupants:</b>	
Signature/Stamp: _____		Name: _____	Ext. _____ Date: _____
Name: _____	Date: _____	Name: _____	Ext. _____ Date: _____
Signature/Stamp: _____		Name: _____	Ext. _____ Date: _____
Name: _____	Date: _____	Approval to Proceed: _____ Date: _____	
Signature/Stamp: _____		<b>APPROVED</b> By Dan Trudgeon at 7:53 am, Sep 04, 2015	

Notes: