



Western UNIVERSITY • CANADA

Notice of Service Interruption/Area Closure Western University Facilities Management

Service Centre 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail

Print Form

Date of Interruption/Closure: <input type="text" value="May 23, 2014"/>	Time(s): <input type="text" value="7am- 10am"/>
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Building(s) Affected: #1 <input type="text" value="Support Services Building"/>	#2 <input type="text"/>
#3 <input type="text"/>	#4 <input type="text"/>

Areas/Rooms Affected Alternate Route/Service:
 1305. Men's Washroom. Men are to use Women's washroom 1307 or 2399 during this time. Women are to use unisex washroom 1312 or 2397 during this time.

Service to be interrupted: #1 <input type="text" value="Washroom 1305. Mens"/>	#2 <input type="text"/>
#3 <input type="text"/>	#4 <input type="text"/>

Description/Reason for Project:
 Install new vanity top.

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"/>	Date: <input type="text"/>	Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: <input type="text"/>		Signature/Stamp: <input type="text"/>	

Reviewed by:	Principal Occupants:		
Name: <input type="text"/>	Name: <input type="text"/>	Ext.: <input type="text"/>	Date: <input type="text"/>
Date: <input type="text"/>	Name: <input type="text"/>	Ext.: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: <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"/>

Approval to Proceed: Date: Approval to Proceed: Date:

APPROVED
 By Andrew at 7:43 am, May 16, 2014

Notes: