



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: **REVISED**
3:01 pm, Jun 12, 2017 Time(s):

Building(s) Affected: #1 #2
 #3 #4
 Areas/Rooms Affected Alternate Route/Service:
 Elevator B.
 Alternate is adjacent Elevator A.

Service to be interrupted: #1 #2
 #3 #4
 Description/Reason for Project:
 Replacement of elevator flooring.

Requester: Date of Request:

Supervising Tradesperson: Unit:
 Trade Manager: Unit: Date:

Contractor: Phone #
 Coordinator/Project Manager: Phone # Date:

Reviewed by Trade Manager(s)/Shop(s) Affected:

Name: <input type="text" value="Elevator Shop"/>	Date: <input type="text" value="May 16, 2017"/>	Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp: APPROVED <i>By Steve MacKay (smackay@uwo.ca) at 1:29 pm, May 16, 2017</i>		Signature/Stamp: <input type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>	Principal Occupants:	
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/> Date: <input type="text"/>
Name: <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"/>	Date: <input type="text"/>	Approval to Proceed: <input type="text"/> Date: <input type="text"/>	
Signature/Stamp: <input type="text"/>		APPROVED <i>By Dan Trudgeon (dtrudgeo@uwo.ca) at 9:09 am, May 17, 2017</i>	

Notes: