

## 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 Nov 19, 2015  |       | Time(s):             | 3:00am- 4:00pm                |       |       |  |
|--|-------|----------------------|-------------------------------|-------|-------|--|
| Building(s) #1 SOCIAL SCIENCE CENTRE (SSC) #2 #4  Areas/Rooms Affected Alternate Route/Service: #4                                 |       |                      |                               |       |       |  |
| Room 3116. Exterior sidewalk along north side of building.   |       |                      |                               |       |       |  |
| Service to be interrupted:  #3  Description/Reason for Project:  Install new window from exterior using elevated lift.  #2  #4  #4 |       |                      |                               |       |       |  |
|  |       |                      |                               |       |       |  |
| Requester: RANDY REGIER  |       |                      | Date of Request: Nov 13, 2015 |       |       |  |
| Supervising Tradesperson: RANDY REGIER Unit:   |       |                      |                               |       |       |  |
| Trade Supervisor: RANDY REGIER   |       |                      |                               | Date: |       |  |
| Contractor: GLASS CANADA   |       |                      | Phone #                       |       |       |  |
| Coordinator/Project Manager: RANDY REGIER  |       |                      | Phone # x88726 Date:          |       |       |  |
| Reviewed by Trade Supervisor(s)/Shop(s) Affected:  |       |                      |                               |       |       |  |
| Name:  | Date: | Name:                | -                             |       | Date: |  |
| Signature/<br>Stamp:   |       | Signature/<br>Stamp: | ′                             |       |       |  |
| Name:  | Date: | Principal (          | Principal Occupants:          |       |       |  |
| Signature/   |       | Name:                | Name:                         |       | Date: |  |
| Stamp:   |       | Name:                | Name:                         |       | Date: |  |
| Name:  | Date: | Name:                |                               | Ext.  | Date: |  |
| Signature/<br>Stamp:   |       | Name:                | Approval to Proceed:          |       | Date: |  |
| Name:  | Date: | 400                  |                               |       |       |  |
| Signature/Stamp:  APPROVED  By Dan Trudgeon at 3:28 pm, Nov 13, 2015   |       |                      |                               |       |       |  |
| Notes: Project crew will look after barricades   | 5.    |                      |                               |       |       |  |

