



Notice of Service Interruption/Area Closure
The University of Western Ontario
Facilities Management
Service Centre 519-661-3304 (ppdhelp@uwo.ca)

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Date of Interruption/Closure: <input type="text" value="February 18 - 22, 2014"/>	Time(s): <input type="text" value="8:00 am - 5:00 pm"/>
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Building(s) Affected:	#1 <input type="text" value="Sydenham Hall"/>	#2 <input type="text"/>	#3 <input type="text"/>	#4 <input type="text"/>
Areas/Rooms Affected	<input type="text" value="Sydenham kitchen and dining room"/>			
Alternate Route/Service:	<input type="text"/>			

Service to be interrupted:	#1 <input type="text" value="Access to Deli area"/>	#2 <input type="text"/>	#3 <input type="text"/>	#4 <input type="text"/>
Description/Reason for Project:	<input type="text" value="Deficiencies from the renovation in the summer to be completed - floor replacement in deli, drywall ceiling repair, lowering sneeze guards."/>			

Requester: <input type="text" value="Marnie Coulson"/>	Date of Request: <input type="text" value="Feb 18, 2014"/>
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Supervising Tradesperson: <input type="text"/>	Unit: <input type="text"/>
Trade Supervisor: <input type="text"/>	Unit: <input type="text"/> Date: <input type="text"/>

Contractor: <input type="text" value="Tonda Construction"/>	Phone # <input type="text" value="+1 (519) 686-5206"/>
Coordinator/Project Manager: <input type="text" value="Marnie Coulson"/>	Phone # <input type="text"/> Date: <input type="text"/>

Reviewed by Trade Supervisor(s)/Shop(s) Affected:			
Name: <input type="text" value="Mary Stiles"/>	Date: <input type="text"/>	Name: <input type="text"/>	Date: <input type="text"/>

Signature/Stamp: <input type="text" value="APPROVED"/> <small>By Val (vjdukesh@uwo.ca) at 1:36 pm, Feb 18, 2014</small>	Signature/Stamp: <input type="text"/>
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Reviewed by:	Principal Occupants:
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"/> Ext.: <input type="text"/> Date: <input type="text"/>

Approval to Proceed: <input type="text"/> Date: <input type="text"/>	Approval to Proceed: <input type="text"/> Date: <input type="text"/>
<input type="text"/>	<input type="text" value="APPROVED"/> <small>By Joe Arbique (jarbique@uwo.ca) at 7:18 am, Feb 19, 2014</small>

Notes: