



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

| | |
|--|---|
| Reviewed by: | Principal Occupants: |
| Name: <input type="text" value="Jeff Jones"/> Date: <input type="text" value="Jun 3, 2014"/> | Name: <input type="text" value="Frank Erle"/> Ext.: <input type="text"/> Date: <input type="text"/> |
| Signature/Stamp: | 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 Merucci (amerucci@uwo.ca) at 7:29 am, Jun 24, 2014

Notes:

