



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:

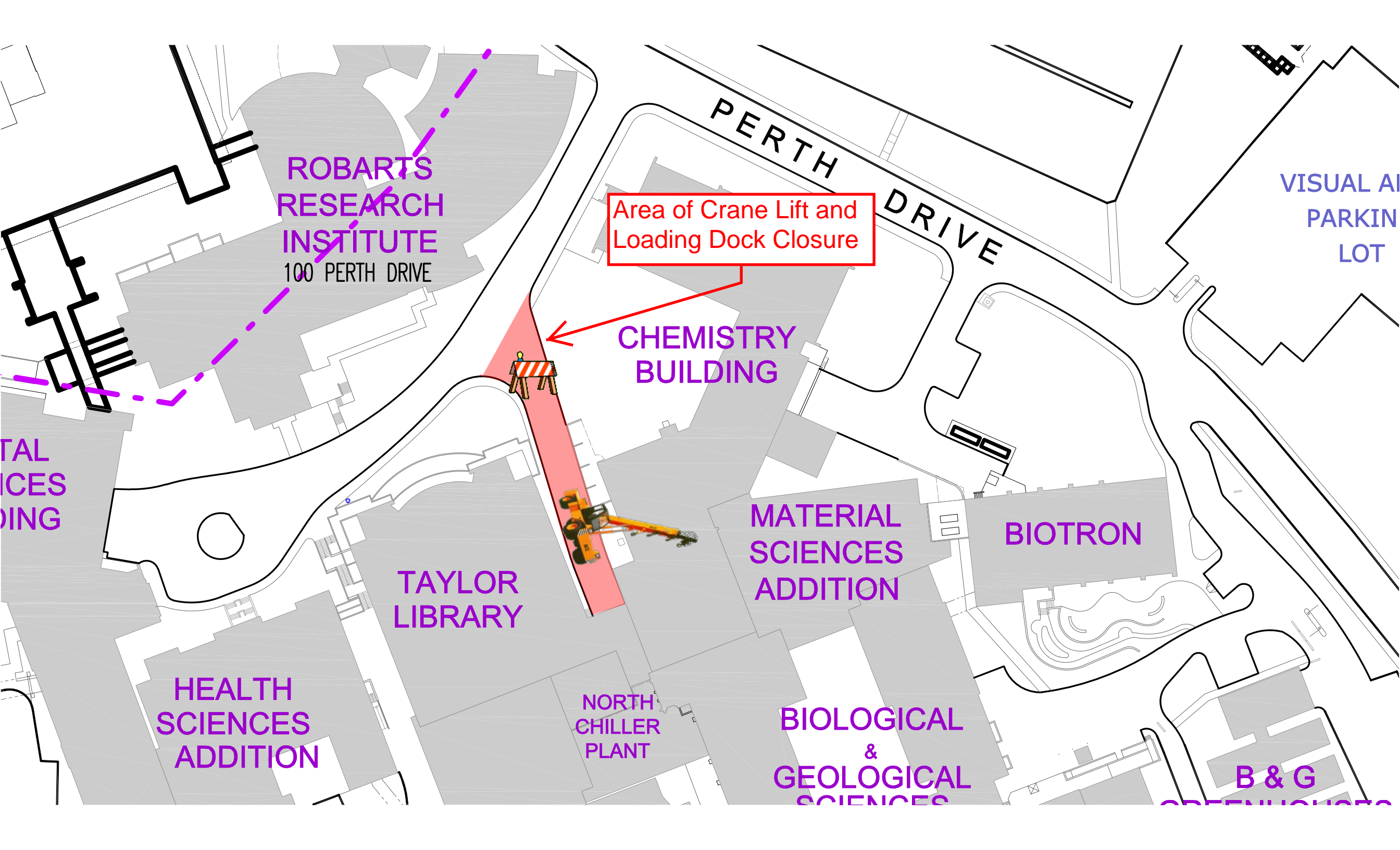
Contractor: Phone #

Coordinator/Project Manager: Phone # Date:

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

Name: <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"/>	
Name: <input type="text"/>	Date: <input type="text"/>	Principal Occupants:	
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/>
Signature/Stamp: <input type="text"/>		Name: <input type="text"/>	Ext. <input type="text"/>
Name: <input type="text"/>	Date: <input type="text"/>	Approval to Proceed: <input type="text"/>	
Signature/Stamp: <input type="text"/>		<div style="border: 2px solid green; padding: 5px; text-align: center;"> APPROVED <i>By Dan Trudgeon at 7:59 am, Jan 11, 2016</i> </div>	
Name: <input type="text"/>	Date: <input type="text"/>		

Notes:



ROBARTS
RESEARCH
INSTITUTE
100 PERTH DRIVE

Area of Crane Lift and
Loading Dock Closure

PERTH
DRIVE

VISUAL ACCESS
PARKING
LOT

CHEMISTRY
BUILDING

TAL
ICES
DING

TAYLOR
LIBRARY

MATERIAL
SCIENCES
ADDITION

BIOTRON

HEALTH
SCIENCES
ADDITION

NORTH
CHILLER
PLANT

BIOLOGICAL
&
GEOLOGICAL
SCIENCES

B & G