



**Notice of Project  
Western University  
Facilities Management  
Client Services 519-661-3304 (fmhelp@uwo.ca)**

Submit by E-mail

Print Form

Project Number: <input type="text" value="9C6327"/>	<input checked="" type="checkbox"/> Miniature Attached	Date/Schedule: <input type="text" value="Monday, August 24, 2015"/>
Project Name: <input type="text" value="Directional Drill Under River UDR Feeders"/>		Time: <input type="text" value="12:00pm to 4:30pm"/>

**Building(s) Affected:**

#1	<input type="text" value="N/A"/>	#2	<input type="text" value="N/A"/>
#3	<input type="text" value="N/A"/>	#4	<input type="text" value="N/A"/>

Areas/Rooms Affected, Alternate Route/Service:

Bore hole drilling rig will be accessing west side of the bridge drill locations via Talbot parking lot. No parking spaces will be taken up by the drill equipment or support vehicles. East side of the bridge drill locations will be accessed via the pedestrian/bike path adjacent to the bridge.


**Service to be interrupted:**

#1	<input type="text" value="Pedestrian Path/Bike Path restrictions"/>	#2	<input type="text"/>
#3	<input type="text"/>	#4	<input type="text"/>

Description/Reason for Project:

Conducting a feasibility study to determine the viability of directional drilling under the river to install high voltage and communications duct structures.

**Project Manager/Co-ordinator:**  Phone #  Cell #

**Signature/Stamp:**  **Client Contact:**  **Phone #**

**Designer Consultant:**

**Contractor:**  **Cell #**

**Emergency Phone List: (to CCPS Only)**  Attached  To Follow

**Special Conditions ( Noise, Odors, Asbestos, Etc.)**

Drilling rig is Diesel operated.

Asbestos  
  Type 3  
  Type 2  
  Type 1  
 Contractor  
 In House Team  
 Other

Information Sheet Sent To Client

**Comments:**

**Shutdowns/Interruptions(Approximate Schedule):**

<b>Electrical Power</b> <input type="checkbox"/>	Date: _____	<b>Elevators</b> <input type="checkbox"/>	Date: _____	<b>ITS</b> <input type="checkbox"/>	Date: _____
<b>Domestic Water</b> <input type="checkbox"/>	Date: _____	<b>Fire Alarms</b> <input type="checkbox"/>	Date: _____	<b>Other</b> <input type="checkbox"/>	Date: _____
<b>Steam</b> <input type="checkbox"/>	Date: _____	<b>Chilled Water</b> <input type="checkbox"/>	Date: _____		
<b>Hot Water Heating</b> <input type="checkbox"/>	Date: _____	<b>Roads / Lots</b> <input type="checkbox"/>	Date: _____		

**Issued By:**  **Date:**

**Signature/Stamp:** *By Andrew at 11:08 am, Aug 21, 2015* **Date:**

**Note:**

