

## 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 Oct 31, 2014 Time(s): 6:00am - 6:00pm						
Building(s) #1   Affected: #2   GolLIP LABORATORY (CB)   #3      #4 Areas/Rooms Affected Alternate Route/Service: Whole buildings.						
Service to be interrupted:       #1 Steam       #2 Domestic Hot Water         #3 Autoclaves       #4 HVAC Heat         Description/Reason for Project:       #4 Repairs to high pressure condensate leak.						
Requester: Mike Herman Date of Re					est: Oct 20, 2014	
Supervising Tradesperson: John Chengal, Power Plant #11 Unit: Power Plant						
Trade Supervisor: Mike Herman			Unit:	Power Plant	r Plant Date:Oct 20, 2014	
Contractor: Besterd Mechanical				Phone # +1 (519) 476-41	193	
Coordinator/Project Manager:				Phone #	Date:	
Reviewed by Trade Supervisor(s)/Shop(s) Affected:						
	de Supervisor(s)/Shop(s) Affected:	-				
Name:	de Supervisor(s)/Shop(s) Affected: Plumber/Fitter Shop	Date: Oct 21, 2014	Name:	WES Control	D	Date: Oct 21, 2014
Signature/	,,	-11	Name: Signature/ Stamp:			
Signature/	Plumber/Fitter Shop	-11	Signature/ Stamp:	RECEIVED By Wayne Drummond (ppdw		
Signature/	Plumber/Fitter Shop PROVED armen Bertone (cbertone @uwo.ca) at 5:10 pm, Oct 21, 2014	Date: Oct 21, 2014	Signature/ Stamp:	RECEIVED		
Signature/ Stamp:	Plumber/Fitter Shop PROVED armen Bertone (cbertone @uwo.ca) at 5:10 pm, Oct 21, 2014	Date: Oct 21, 2014	Signature/ Stamp: Principal (	RECEIVED By Wayne Drummond (ppdw	rad@uwo.ca) at 2:48 pm, Oc	ct 21, 2014
Signature/ Stamp: Name: Signature/	Plumber/Fitter Shop PROVED armen Bertone (cbertone @uwo.ca) at 5:10 pm, Oct 21, 2014	Date: Oct 21, 2014	Signature/ Stamp: Principal ( Name: Name: Name:	RECEIVED By Wayne Drummond (ppdw	Ext. Ext. Ext.	Date: Date: Date: Date:
Signature/ Stamp: Name: Signature/ Stamp: Name: Signature/	Plumber/Fitter Shop PROVED armen Bertone (cbertone @uwo.ca) at 5:10 pm, Oct 21, 2014	Date: Oct 21, 2014	Signature/ Stamp: Principal ( Name: Name:	RECEIVED       By Wayne Drummond (ppdw       Dccupants:	Ext. Ext. Ext. Ext. Ext.	Date: Date: Date: Date: Date: Date:
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