



Notice of Service Interruption/Area Closure
Western University
Facilities Management

REVISED

7:21 am, Sep 15, 2017

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" value="Ted Chelchowski"/>	Date: <input type="text" value="Aug 4, 2017"/>	Name: <input type="text"/>	Date: <input type="text"/>
Signature/Stamp:		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"/> Date: <input type="text"/>
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"/>	Date: <input type="text"/>	Name: <input type="text"/>	Ext. <input type="text"/> Date: <input type="text"/>
Signature/Stamp: <input type="text"/>		Approval to Proceed: <input type="text"/> Date: <input type="text"/>	
Name: <input type="text"/>	Date: <input type="text"/>	<div style="border: 2px solid green; padding: 5px; text-align: center;"> <p>APPROVED By Dara Gomez at 2:15 pm, Aug 23, 2017</p> </div>	
Signature/Stamp: <input type="text"/>			

Notes:

**East Stairwell
Closure**



Western On Campus Pharmacy

Book Store At Western

Starbucks UCC



**Alternate:
West
Stairwell**

