

NOTICE OF SERVICE INTERRUPTION/WORK FORM

Date of Request (yyyy/mm/dd): _____		Requester: _____	
Start Date – End			
Start Date (yyyy/mm/dd) _____	Time (s) _____	Notes _____	
End Date (yyyy/mm/dd) _____	Time (s) _____	_____	
Building(s) Affected:		1: _____	2: _____
		3: _____	4: _____
Areas/Rooms Affected: _____			
Service to be interrupted:		1: _____	2: _____
		3: _____	4: _____
Description/Reason for Project:			
Contractor: _____		Phone #: _____	
Contractor/Project Managers: _____		Phone #: _____	
Should you have any questions or concerns, please contact			
Notes:			

July 2, 2026

[CAW Student Centre F/A \(Bell Testing 7am-8am\)](#)

7:00 AM – 3:00 PM

[CAW Student Centre Sprinkler](#)

July 3, 2026

[Welcome Centre Sprinkler](#)

7:00 AM – 12:00

[Assumption University F/A Bell Testing: \(7am-8am\)](#)

7:00 AM – 1:00 PM

[Welcome Centre F/A \(Bell Testing 7am-8am\)](#)

7:00 AM – 3:00 PM