

## NOTICE OF SERVICE INTERRUPTION/WORK FORM

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

↑  
TO SUNSET AVENUE

ACCESS TO  
ALL FLOORS

LOBBY 106  
CLOSED  
JAN. 30  
TO  
FEB. 3

MEN'S  
WASHROOM

ELEVATOR

ACCESS TO  
ALL FLOORS

ELEVATOR

WOMEN'S  
WASHROOM

ACCESS TO  
ALL FLOORS

←  
TO CHRYSLER HALL NORTH

→  
TO CHRYSLER HALL SOUTH



CHT FIRST FLOOR PLAN  
NOT TO SCALE