

## 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>			
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>			

<b>Contractor:</b> _____	<b>Phone #:</b> _____
<b>Contractor/Project Managers:</b> _____	<b>Phone #:</b> _____

Should you have any questions or concerns, please contact

**Notes:**

↑  
TO SUNSET AVENUE

←  
TO CHRYSLER HALL NORTH

→  
TO CHRYSLER HALL SOUTH

ACCESS TO ALL FLOORS

ACCESS TO ALL FLOORS

ACCESS TO ALL FLOORS

LOBBY 106  
CLOSED  
WED. JAN. 30  
TO  
TUES. FEB. 5

MEN'S  
WASHROOM

ELEVATOR

WOMEN'S  
WASHROOM

ELEVATOR



CHT FIRST FLOOR PLAN  
NOT TO SCALE

