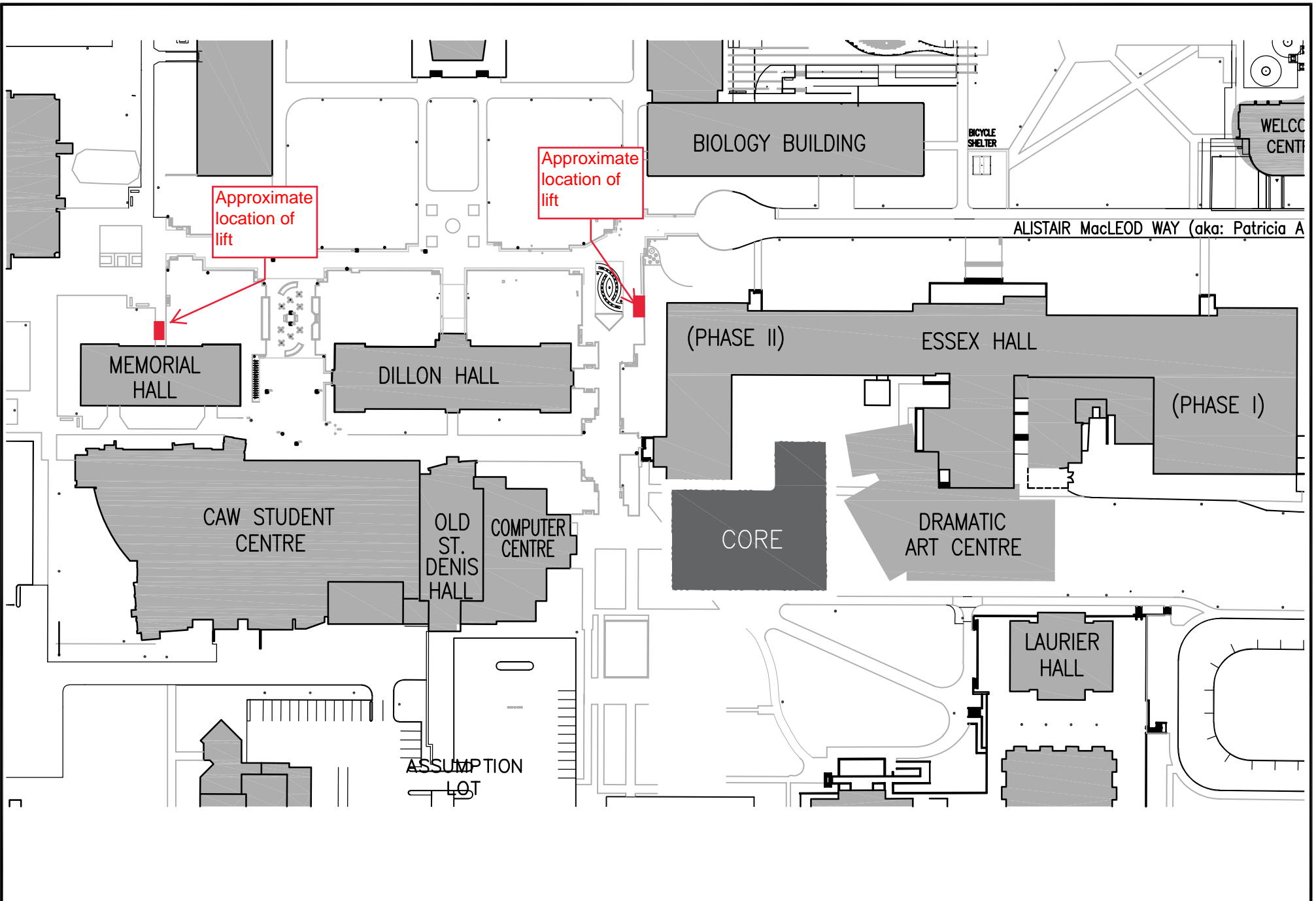


NOTICE OF SERVICE INTERRUPTION/WORK FORM

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:			



PROJECT:
ESSEX & MEMORIAL BAS MODERNIZATION

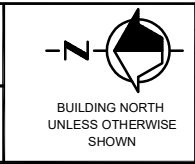
DRAWING TITLE:
Coordination Site Plan - LOCATION OF LIFT

FACILITY SERVICES
 Facility Planning, Renovations
 and Construction

Chrysler Hall Tower, Room 616
 401 Sunset Avenue
 Windsor, Ontario N9B 3P4
 Phone: 519-253-3000

ALL DIMENSIONS TO BE
 FIELD CHECKED AND/OR
 VERIFIED BY THE
 CONTRACTOR ON THE JOB

A A DETAIL No.
B/C B LOCATION SHEET
 C DETAIL SHEET



APPROVED: .

DATE: THURSDAY, APRIL 20, 2023

DRAWN BY: E. VENTIMIGLIA

SCALE: NTS

PROJECT No.: .

DRAWING No.: **SK-1**