

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:			

BIOLOGY BUILDING

BICYCLE
SHELTER

WELCOME
CENTRE

ALISTAIR MacLEOD WAY (aka: Patricia Ave.)

Staging Area
#1

#2

NORTH
PENTHOUSE

ESSEX

CENTER
PENTHOUSE

HALL

SOUTH
PENTHOUSE

LOWER
ROOF

CORE

DRAMATIC ART

LAURIER

