University of Windsor

Facility Services

NOTICE OF SERVICE INTERRUPTION/WORK FORM

Date of Request (yyyy/mm/dd): 2015-11-17 **Requester**: _____

_____ **Start Date – End**

Start Date (yyyy/mm/dd) 2015-11-17 Time (s) 9:00am
End Date (yyyy/mm/dd) 2015-11-17 Time (s) 4:00pm

Notes _____

Building(s) Affected:
1: CAW Student Centre CAWSC **2:** Please Select
3: Please Sele **4:** Please Select

Areas/Rooms Affected: _____

Service to be interrupted:
1: Elevator **2:** _____
3: _____ **4:** _____

Description/Reason for Project:

Weight testing will be done on the 2 freight elevators in the CAWSC.

They will be doing one at a time so both will not be out of service at the same time.

Contractor: KONE **Phone #:** _____

Contractor/Project Managers: _____ **Phone #:** _____

Should you have any questions or concerns, please contact

Please contact maintenance dispatch at 519-253-3000 ext. 2850

Notes: