

Project: ..... Date: ..... / ..... / .....

From: ..... Substitution Request Number: .....

To: ..... A/E Project Number: .....

Re: ..... Contract For: .....

Specification Title: ..... Description: .....

Section: ..... Page: ..... Article/Paragraph: .....

Proposed Substitution: .....

Manufacturer: ..... Phone: ( ..... ) ..... - .....

Address: .....

STREET

CITY

STATE

ZIP CODE

Trade Name: ..... Model Number: .....

Installer: ..... Phone: ( ..... ) ..... - .....

Address: .....

STREET

CITY

STATE

ZIP CODE

**HISTORY:**    New Product    2–5 Years Old    5–10 Years Old    More Than 10 Years Old

Differences Between Proposed Substitution and Specified Product: .....

 Point-By-Point Comparative Data Attached—**Required by A/E**

Reason For Not Providing Specified Item: .....

**SIMILAR INSTALLATION:**

Project: ..... Date Installed: ..... / ..... / .....

Owner: ..... Architect: .....

Address: .....

STREET

CITY

STATE

ZIP CODE

**PROPOSED SUBSTITUTION AFFECTS OTHER PARTS OF WORK:**    No    Yes; Explain.

Savings to Owner For Accepting Substitution: ..... (\$ ..... )

Proposed Substitution Changes Contract Time:    No    Yes; ..... Days.

**SUPPORTING DATA ATTACHED:**

Drawings    Product Data    Samples    Tests    Reports .....

**THE UNDERSIGNED CERTIFIES:**

- Proposed substitution has been fully investigated and determined to be equal or superior in all respects to specified product.
- Same warranty will be furnished for proposed substitution as for specified product.
- Same maintenance service and source of replacement parts, as applicable, is available.
- Proposed substitution will have no adverse effect on other trades and will not affect or delay progress schedule.
- Cost Data as stated above is complete. Claims for additional costs related to accepted substitution which may subsequently become apparent are to be waived.
- Proposed substitution does not affect dimensions and functional clearances.
- Payment will be made for changes to building design, including A/E design, detailing and construction costs caused by the substitution.
- Coordination, installation and changes in the Work as necessary for accepted substitution will be complete in all respects.

Submitted by: ..... Signed by: .....

Firm: ..... Phone: ( ..... ) ..... - .....

Address: .....  
*STREET*

.....  
*CITY* ..... *STATE* ..... *ZIP CODE*

**A/E'S REVIEW AND ACTION:**

- Substitution approved—Make submittals in accordance with Specification Section 01 25 00, Substitution Procedures.
- Substitution approved as noted—Make submittals in accordance with Specification Section 01 25 00, Substitution Procedures.
- Substitution rejected—Use specified materials.
- Substitution Request received too late—Use specified materials.

Signed By: ..... Date: ..... / ..... / .....

**ADDITIONAL COMMENTS:**

Contractor	Subcontractor	Supplier	Manufacturer	A/E	
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