

SECTION 01 60 00.13 – REQUEST FOR SUBSTITUTION FORM

REQUEST FOR SUBSTITUTION (Attach Additional Pages as Necessary)

From: _____

To: _____

References: Specification Section: _____
Specified Product Name: _____
Drawing Sheet(s): _____

Description of Proposed Substitution: Substitute Product Name: _____
Manufacturer: _____
Installer: _____
Reason for not providing specified item: _____
Differences between proposed substitution and specified product: _____

Point-by-point comparative data attached (Required for analysis and review by Architect)

Substitution Product History: New Product 2 to 5 Years Old 5 to 10 Years Old More than 10 Years Old
Similar Installations of Proposed Product:
Project: _____
Project Address: _____

Effect of Proposed Substitution:
Acceptance of proposed substitute will require the following change in Contract Sum and Contract Time:
 No Change in Contract Sum
 Increase Contract Sum By \$ _____
 Decrease Contract Sum By \$ _____
Effect of proposed request for substitution on (Attach additional sheets if necessary):
a. Change in Construction Progress Schedule: No Effect _____
b. Changes required in details and construction of related work: No Change Yes, Explain: _____
c. Change in warranty requirements: No Change _____

Representations by Contractor:
a. Substitute item is equivalent or superior to that specified in quality and durability, design, appearance, function, finish, performance, is of size and weight that will permit installation in spaces provided, and that will allow adequate service access;
b. Substitute item is compatible with other portions of the Work;
c. Substitute item has been coordinated with other portions of the Work;
d. Substitute item has received necessary approvals from authorities having jurisdiction;
e. Substitute item is consistent with the Contract Documents and will produce the intended results;
f. Substitute item provides specified warranty; and
g. If requested substitution involves more than one contractor, or subcontractor, requested substitution has been coordinated with other portions of the Work, is uniform and consistent, is compatible with other products, and is acceptable to all contractors, or subcontractors involved.

(Signature) (Typed or Printed Name and Title) (Date)

END OF DOCUMENT 01 60 00.13