

DOCUMENT 00440 - SUBSTITUTION REQUEST FORM

FOLLOWING IS A SAMPLE FORMAT FOR SUBMISSION OF REQUEST FOR APPROVAL OF SUBSTITUTES. SUBMISSIONS SHALL BE MADE IN TRIPLICATE ON BIDDER'S LETTERHEAD FOR EACH PROPOSED SUBSTITUTE ITEM. REQUEST SHALL BE SUBMITTED IN ACCORDANCE WITH SECTIONS 00801 AND 01600.

SUBSTITUTION REQUEST

TO: COLUMBIA HOUSING AUTHORITY\_\_\_\_\_

FROM: \_\_\_\_\_

We hereby submit for your consideration the following product instead of the specified item for the above project:

<u>Section</u>	<u>Paragraph</u>	<u>Specified Item</u>
_____	_____	_____
Proposed Substitution	_____	_____

Attach complete technical data, including laboratory tests, if applicable.

Include complete information on changes to Drawings and/or Specifications which proposed substitution will require for its proper installation.

Fill in blanks below:

- A. Does the substitution affect dimensions shown on the Drawings?  
Yes\_\_\_\_\_ No\_\_\_\_\_
  
  - B. Will the undersigned pay for changes to building design, including engineering and detailing cost caused by the requested substitution?  
Yes\_\_\_\_\_ No\_\_\_\_\_
  
  - C. What affect does substitution have on other trades?\_\_\_\_\_
- \_\_\_\_\_

D. Differences between proposed substitution and specified item?

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E. Manufacturer's guarantees of proposed and specified items are:

\_\_\_\_\_ Same      \_\_\_\_\_ Different (Explain if different on Attachment)

The undersigned states that the function, appearance, and quality are equivalent or superior to the specified item.

Submitted by:

For Use by Design Consultant:

\_\_\_\_\_  
Signature

Accepted     Accepted as Noted

\_\_\_\_\_  
Firm

Not Accepted     Received Too Late

\_\_\_\_\_  
Address

By: \_\_\_\_\_

\_\_\_\_\_  
Date:

Date: \_\_\_\_\_

\_\_\_\_\_  
Telephone:

Remarks \_\_\_\_\_

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END OF DOCUMENT 00440