

**SECTION 00 43 25 - SUBSTITUTION REQUEST FORM DURING BIDDING**

**(BIDDERS SHALL USE THIS FORM FOR SUBMITTING SUBSTITUTION REQUESTS DURING BIDDING. OTHER FORMS OF SUBSTITUTION REQUESTS WILL NOT BE CONSIDERED. THIS FORM MUST BE RECEIVED BY ARCHITECT NOT LATER THAN 7 WORKING DAYS PRIOR TO BID OPENING DATE)**

Project: **(Project Name)** Substitution Request Number: \_\_\_\_\_  
IFB Project No.: IFB #: AC-(FY)-B-(xxxx)-S Re: \_\_\_\_\_

From: \_\_\_\_\_

Specification Title: \_\_\_\_\_ Section: \_\_\_\_\_

Description: \_\_\_\_\_ Page: \_\_\_\_\_ Article/Paragraph: \_\_\_\_\_

Proposed Substitution: \_\_\_\_\_

Manufacturer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Trade Name: \_\_\_\_\_ Model No.: \_\_\_\_\_

Installer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

History: New Product      1 – 4 years old      5 – 10 years old      Exceeds 10 years old

Differences between proposed substitution and specified product: \_\_\_\_\_

\_\_\_\_\_

**Point by Point comparative data attached – REQUIRED BY ARCHITECT**

Reason for not providing specified item: \_\_\_\_\_

\_\_\_\_\_

**Similar Installation:**

Project: \_\_\_\_\_ Architect: \_\_\_\_\_

Address: \_\_\_\_\_ Owner: \_\_\_\_\_

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

Proposed substitution affects other parts of Work: \_\_\_ No \_\_\_ Yes

Explain \_\_\_\_\_

\_\_\_\_\_

Savings to Owner for accepting substitution: \_\_\_\_\_ (\$ \_\_\_\_\_)

Proposed substitution changes Contract Time: \_\_\_ No \_\_\_ Yes [Add] [Deduct] \_\_\_\_\_ 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:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

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

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

Attachments:

\_\_\_\_\_

\_\_\_\_\_

**END OF SECTION**