

DIVISION 01 GENERAL REQUIREMENTS

01 25 00 Substitution Form

PART 1: GENERAL

1.01 SUBSTITUTION FORM

A. The following form shall be used for product substitutions:

TO: ARCHITECT OF RECORD

OR

TEXAS STATE UNIVERSITY PROJECT REPRESENTATIVE

PROJECT:

SPECIFIED ITEM:

Section _____ Paragraph _____ Description _____

The undersigned requests consideration of the following:

PROPOSED SUBSTITUTION _____

Upon submitting this Request for Substitution, the undersigned certifies that the following paragraphs are correct, unless otherwise modified on attachments:

1. Contractor has investigated the proposed substitution and believes that it is equal to or superior in all respects to specified item, and will conform to design requirements and artistic effect
2. Cost saving to Owner for accepting substitution: None ___ \$ _____
3. Contractor will pay the Architect and/or Engineers for additional studies, investigations, submittal reviews, redesign and/or analysis caused by the requested substitution and at no additional cost to Owner.
4. Substitution requires dimensional changes or redesign of structure or M & E Work No ___ Yes ___ (If yes, attach complete data).
5. Contractor will waive future claims for added cost to Contract caused by substitution.
6. Changes in contract time caused by substitution: No ___ Yes ___ Add/Deduct ___ days.
7. Adverse affect on other Trades caused by substitution: No ___ Yes ___ (If yes, explain on attachment).
8. Contractor will modify other parts of the Work as may be required to make all parts of Work complete and functioning. Yes ___ (Explain on attached page if necessary)
9. Same type of warranty for specified product will be furnished for proposed substitution: Yes ___ No ___
10. Maintenance Service Available: Yes ___ No ___ Where? _____
11. Contractor has complied with requirements of the Texas State University' Design Guidelines and Construction Standards and Contract Documents as part of request for substitution, and has completely filled-in this form.

REASON FOR NOT GIVING PRIORITY TO SPECIFIED ITEM:

See attached ___ Not required ___

Submitted by:

Signature: _____

Firm _____

Address _____

Date _____

Telephone _____

For use by Architect:

_____ Approved

_____ Approved as noted

_____ Rejected

Rejected only for conformance with

Design Concept of Project and with

Information in Contract Documents

Signature _____

Date _____

REQUIRED ATTACHMENTS:

- A. Product Data for Specified Item: Clearly marked to indicate full compliance with specification section and Contract Documents: Attached
- B. Product Data for Substitution: Clearly marked for adequate evaluation and comparison with data submitted for specified item: Attached ___
- C. Samples: Attached ___ Not Required ___
- D. Cost Data and Implications of Substitution: Attached ___ Not required ___
- E. Contractor's Comments: Attached ___ Not required ___
- F. Manufacturers certifications on asbestos and PCB: Required/must be attached
- G. Other: _____

PART 2: PRODUCTS (NOT USED)

PART 3: EXECUTION (NOT USED)

END OF SECTION 01 25 00