



SUBSTITUTION REQUEST FORM

Contractor Name of Business: _____
 Subcontractor Address: _____
 Supplier City, State, Zip: _____
Phone: _____; Fax: _____; Email: _____

Attn: Ashish Mishra, AIA, NCARB, LEED AP
Mishra Architecture PLLC
6800 S Creek Rd, Charlotte, NC 28277; Fax: (704) 919-5822; Email: ashish@mishraarch.com

Project: _____ Place: _____ Date: _____

Specified Item:

WHY IS SUBSTITUTION BEING SUBMITTED? (Select 1 of the following):

- Pre-bid Substitution (Prior Approval): Include detailed analysis comparing proposed substitution against specified product, including redlined drawing/Specification Section showing differences.
- Specified Product is not available.
- Cost savings to Owner. Indicate comparative cost analysis as attachment.
- Other. Explain: _____

PROPOSED SUBSTITUTION:

Attached data also includes product description, specifications, drawings, photographs, performance and test data adequate for evaluation of the request; applicable portions of the data are clearly identified.

Attached data also includes description of changes to Contract Documents which proposed substitution will require for its proper installation.

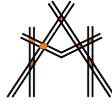
Attachments: _____

EFFECTS OF PROPOSED SUBSTITUTION:

Does the proposed substitution affect dimensions shown on drawings? NO YES

Does the proposed substitution change drawings? NO YES

If yes, provide drawing numbers: _____



M I S H R A
ARCHITECTURE PLLC

The undersigned states that the following paragraphs, unless modified in attachments, are correct:

1. The undersigned will pay for changes to the building design, including engineering design, detailing and construction costs caused by the requested substitution.
2. The proposed substitution will have no adverse effects on other trades.
3. The function, appearance, and quality of the proposed substitution are *equivalent or superior* to the specified item.
4. If major changes are proposed to Contract Documents, approvals need to be obtained from authorities having jurisdiction on the above mentioned project.

Submitted by: _____ PRINT NAME: _____

Firm Name: _____ Date: _____

FOR USE BY DESIGN CONSULTANT:

Check and Complete:

Accepted

Accepted as Noted:

Not accepted

Received too Late

By: _____ PRINT NAME: _____

Date: _____

Remarks: _____

Sent to: _____

Date: _____