SUBSTITUTION REQUEST FORM Thermco™ Foam Insulation

To: _____

Project Name: _____

Specified Item: _____ _____ _____
Section Page Description

The undersigned requests consideration of the following product substitution:

PROPOSED SUBSTITUTION: <u>Thermco™ Foam Insulation</u>

? Attached data includes:
- ? Product Description
- ? Drawings
- ? Photographs
- ? Performance and Test Data
- ? Specifications

? No changes will be required to the Contract Documents for its proper installation

? Attached Data includes description of changes to the Contract Documents that the substitution will require for its proper installation

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

1. The proposed substitution does not affect dimensions shown on the drawings.
2. No changes to the building design, engineering design, or detailing are required by the proposed substitution.
3. The proposed substitution will have no adverse affect on other trades, the construction schedule, or specified warranty requirements.
4. No maintenance is required by the proposed substitution.

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

Submitted by: _____

Signature: _____

Company: _____

Address: _____

_____

Date: _____

Phone: _____

Fax: _____

For use by Architect/Project Engineer:

? Approved ? Approved as noted

? Not Approved ? Received too late

By: _____

Date: _____

Remarks: _____

_____

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