

COMPLETE AND SUBMIT THIS FORM FOR APPROVAL OF SUBSTITUTES. SUBMISSION SHALL BE MADE IN DUPLICATE FOR EACH PROPOSED SUBSTITUTE ITEM.

SUBSTITUTION REQUEST FORM

TO: MIKE EMORY, SPARTANBURG COUNTY PROCUREMENT DEPARTMENT, 366 NORTH CHURCH STREET, SPARTANBURG SC 29303; EMAIL: memory@spartanburgcounty.org

PROJECT: TYGER RIVER REGIONAL PARK-PHASE 1

We 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 or end-product design, including engineering and detailing costs caused by the requested substitution?

Yes _____ No __

C. What effect does substitution have on other trades?

D. Differences between proposed substitution and specified item?

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

Same

Different (Explain on Attachments)

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

Submitted by:

Signature

For Use by Design Consultant

Firm

Accepted Accepted as Noted
 Not Accepted Received Too Late

Address

By: _____

Date: _____

Date: _____ TEL/FAX: _____

Notes:
