



NORTHWEST MISSOURI STATE UNIVERSITY  
 CAPITAL PROGRAMS  
**Product Substitution Request**

**SECTION 006325 Product Substitution Request**

PROJECT NUMBER
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PROJECT TITLE AND LOCATION
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CHECK APPROPRIATE BOX <input type="checkbox"/> <b>SUBSTITUTION PRIOR TO BID OPENING</b> (Minimum of (5) working days prior to receipt of Bids as per Article 4 – Instructions to Bidders)  <input type="checkbox"/> <b>SUBSTITUTION FOLLOWING AWARD</b> (Maximum of (20) working days from Notice to Proceed as per Article 3 – General Conditions)
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FROM: BIDDER/CONTRACTOR (PRINT COMPANY NAME)
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TO: ARCHITECT/ENGINEER (PRINT COMPANY NAME)
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Bidder/Contractor hereby requests acceptance of the following product or systems as a substitution in accordance with provisions of the Bidding Documents:

SPECIFIED PRODUCT OR SYSTEM
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SPECIFICATION SECTION NO.
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SUPPORTING DATA <input type="checkbox"/> Product data for proposed substitution is attached (include description of product, standards, performance, and test data) <input type="checkbox"/> Sample <input type="checkbox"/> Sample will be sent, if requested <input type="checkbox"/> Side by Side Comparison
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**QUALITY COMPARISON**

	SPECIFIED PRODUCT	SUBSTITUTION REQUEST
NAME, BRAND		
CATALOG NO.		
MANUFACTURER		
VENDOR		

**PREVIOUS INSTALLATIONS**

PROJECT	ARCHITECT/ENGINEER
LOCATION	DATE INSTALLED

SIGNIFICANT VARIATIONS FROM SPECIFIED PRODUCT:
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**REASON FOR SUBSTITUTION:**

**DOES PROPOSED SUBSTITUTION AFFECT OTHER PARTS OF WORK?**

YES       NO

IF YES, EXPLAIN:

**SUBSTITUTION REQUIRES DIMENSIONAL REVISION OR REDESIGN OF STRUCTURE OR A/E WORK**

YES       NO

**BIDDER'S/CONTRACTOR'S STATEMENT OF CONFORMANCE OF PROPOSED SUBSTITUTION TO CONTRACT REQUIREMENT:**

We have investigated the proposed substitution. We believe that it is equal or superior in all respects to specified product, except as stated above; that it will provide the same Warranty as specified product; that we have included complete implications of the substitution; that we will pay redesign and other costs caused by the substitution which subsequently become apparent; and that we will pay costs to modify other parts of the Work as may be needed, to make all parts of the Work complete and functioning as a result of the substitution.

BIDDER/CONTRACTOR	DATE
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**REVIEW AND ACTION**

Resubmit Substitution Request with the following additional information:  
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Substitution is accepted.

Substitution is accepted with the following comments:  
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Substitution is not accepted.

ARCHITECT/ENGINEER	DATE
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STAKEHOLDER REPRESENTATIVE	DATE
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PROJECT MANAGER	DATE
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DIR. OF CAPITAL PROGRAMS	DATE
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AVP FACILITY SERVICES AND CAPITAL PROGRAMS	DATE
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