

CONSULTING ENGINEERS

# OWENS AND ASSOCIATES, INC.

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## *substitution request form*

Project: MYRTLE BEACH CONVENTION CENTER HVAC  
RENOVATION PHASE II

Bid Date: July 10, 2019

Project No.: 1905

Request Deadline: July 1, 2019

Date of Substitution Request: \_\_\_\_\_

Specification Title: \_\_\_\_\_

Section Number: \_\_\_\_\_

TO ALL BIDDERS: The materials, products and equipment described in the project manual specifications establish a standard of required function, dimension, appearance, quality and performance to be met by and proposed substitutions. The burden of proof of the merit of the substitution is upon the entity that is proposing the substitution. All information relative to the substitution, including performance data, factory literature or other such data, that indicates that the substitution is or equal function, dimension, appearance, quality and performance must be submitted with this request. To be approved, a proposed product shall also meet or exceed all express requirements of the contract documents. Any request for substitution shall be submitted up until the tenth day prior to the bid opening date and time. The joint decision of the Architect and the Owner to approve or not approve the proposed substitution shall be final.

Proposed Manufacturer: \_\_\_\_\_

Proposed Product: \_\_\_\_\_

Model and Serial Number: \_\_\_\_\_

Manufacturer Address: \_\_\_\_\_

Manufacturer Website: \_\_\_\_\_

The undersigned certifies:

- Proposed substitution has been fully investigated and determined to be equal or superior in all respects to specified product.
- Same warranty will be furnished for proposed substitution as for specified product.
- Same maintenance service and source of replacement parts, as applicable, is available.
- Proposed substitution will have no adverse effect on other trades and will not affect or delay progress schedule.
- Proposed substitution does not affect dimensions and functional clearances.
- Payment will be made for changes to building design, including A/E design, detailing and construction costs caused by the substitution.

Submitted by: \_\_\_\_\_

Signature: \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone / Fax / Email: \_\_\_\_\_

Supporting Data Attached:

☐ Drawings ☐ Product Data ☐ Samples ☐ Tests ☐ Reports ☐ Side by side Comparison ☐ \_\_\_\_\_

Submit product specific documents only. Substitution request will not be reviewed without specific information. If binders are submitted, products must be clearly marked and or indicated for review. Applicant must return this form with submission.

Architect / Engineer Review and Action:

☐ Substitution Approved

☐ Substitution Approved as Noted

☐ Substitution Rejected

Signed by: \_\_\_\_\_

Date: \_\_\_\_\_