SECTION 00 43 25 SUBSTITUTION REQUEST FORM

TO:	FINEPOINT TECHNOLOGY	DATE:
	416 GATEWAY BLVD BURNSVILLE, MN 55337	
	RUCTIONS: Complete the following for a substoposed item. (Multiple items require a separate f	titution request. Attach technical data, cut-sheets, drawings, etc. form for each request.)
PROJECT:		PROJECT #:
Section:		Paragraph:
Specif	fied Item:	
Propo	osed Substitution:	
	le complete information, including changes to Dre e for its proper installation. Complete the following	awings and/or Specification, which proposed substitution will ng below:
Α.	. Does the substitution affect dimensions shown	on the Drawings?
В.	. Will affect does the substitution have on other	trades?
C.	. Differences between proposed substitution and	specified item?
The un	ndersigned states that the function, appearance an	nd quality are equivalent or superior to the specified item.
Submitted by:		Date:
	(Signature)	
Name	/Title (Print):	
Firm I	Name:	
Phone	e Number:	
Conta	et Email Address:	

END OF SECTION