

**SECTION 00 43 25  
SUBSTITUTION REQUEST FORM**

**TO:** FINEPOINT TECHNOLOGY  
416 GATEWAY BLVD  
BURNSVILLE, MN 55337

**DATE:** \_\_\_\_\_

**INSTRUCTIONS:** Complete the following for substitution request. Attach technical data, cut-sheets, drawings, etc. with your request. *(To request substitution of multiple items, submit a separate form for each item.)*

**PROJECT:** \_\_\_\_\_ **PROJECT #:** \_\_\_\_\_

**Section:** \_\_\_\_\_ **Paragraph:** \_\_\_\_\_

**Specified Item:** \_\_\_\_\_

**Proposed Substitution:** \_\_\_\_\_

Include complete information, including changes to Drawings and/or Specification, which proposed substitution will require for its proper installation. Complete the following below:

A. Does the substitution affect dimensions shown on the Drawings?

\_\_\_\_\_

B. What effect does the substitution have on other trades?

\_\_\_\_\_

C. Differences between proposed substitution and specified item?

\_\_\_\_\_

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

**Submitted by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Signature)

**Name/Title (Print):** \_\_\_\_\_

**Firm Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Contact Email Address:** \_\_\_\_\_

**END OF SECTION**