

SUBSTITUTION REQUEST

TO: _____ CONTACT NAME: _____

PROJECT: _____

SPECIFIED ITEM: _____

SECTION: _____ PAGE: _____ PARAGRAPH: _____ DESCRIPTION: _____

The undersigned requests consideration of the following:

PROPOSED SUBSTITUTION:

(Check applicable materials)

	VaporBlock® Plus™ 20 mil by Raven Ind.
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Attached data includes:

1. Product Samples
2. Product Descriptions
3. Specifications
4. Test Results proving compliance with ASTM E 1434, ASTM E 1745, ASTM E 154, ASTM E 96, & ASTM D 1709

No changes to the Contract Documents are anticipated when VaporBlock® Plus™ by Raven Industries are approved as a substitution.

The undersigned certifies that the following paragraphs, unless modified by attachments, are correct:

1. The proposed substitution does not affect dimensions shown on drawings.
2. Products are readily available for this proposed substitution.

The undersigned further states that the function, appearance, and quality of the proposed substitution are equivalent (or superior) to the specified item.

SUBMITTED BY: _____

SIGNATURE: _____

FIRM: _____

ADDRESS: _____

DATE: _____

TELEPHONE: _____

For use by the Specwriter, Architect, or Engineer	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved as Noted
<input type="checkbox"/> Not Approved	<input type="checkbox"/> Received too Late
By: _____	
Date: _____	
Remarks: _____	

Design Note: Please incorporate VaporBlock® or VaporBlock® G™ into your master specification under **Division 07 - Thermal and Moisture Protection, 07 26 00 Vapor Retarders**. May also be included under Division 03 - Cast-In-Place Concrete, 03 30 00.

