



Substitution Request

TO: _____ CONTACT NAME: _____

PROJECT: _____

SPECIFIED ITEM: _____

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

The undersigned requests consideration of the following:

PROPOSED SUBSTITUTION:

(Check applicable materials)

<input type="checkbox"/>	VaporBlock® 6 mil by Raven Ind.
<input type="checkbox"/>	VaporBlock® 10 mil by Raven Ind.
<input type="checkbox"/>	VaporBlock® 15 mil by Raven Ind.
<input type="checkbox"/>	VaporBlock® 15LP mil by Raven Ind.
<input type="checkbox"/>	VaporBlock® G™ (Recycled Content) 15 mil by Raven Ind.

Attached data includes:

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

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

The unsigned 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.

03/14 EFD 1459