**To:** text here

**From:** text here

**Copies:** text here

**Submittal No:** test here

**Submittal Date:** YYYY MM DD

**Project Name:** text here

**Project No.:** text here

**First Submittal of this Item or**  **Resubmittal** (check one)

#### Type Of Submittal (check one)

Product Data  Schedule  Performance Data

Sample  Warranty  Operations and Maintenance Data

Color Selection  Test Document

Shop Drawing  Record Document  Other

|  |  |
| --- | --- |
| **Description Of Submittal:** | Product Name |
| Manufacturer |
| Address |
| Subcontractor/Supplier |
| Section No.(s)       Drawing No.(s) |
| **References:** | Part/Paragraph       Detail Ref. |

|  |  |
| --- | --- |
| Contractor's Approval | Consultant's Action Reviewed  Reviewed As Modified  Revise And Resubmit  Not Reviewed |
| Date Received By Consultant YYYY MM DD | Date Returned YYYY MM DD |