

**SUBMITTAL COVER SHEET**

**NJSDA 652**

Date: \_\_\_\_\_

Contract No.: \_\_\_\_\_ Contract Name: \_\_\_\_\_

Design Consultant \_\_\_\_\_ PMF: \_\_\_\_\_

Submittal Date: \_\_\_\_\_ Submitting Contractor: \_\_\_\_\_

Items Submitted: \_\_\_\_\_ Specification Division: \_\_\_\_\_

Submittal No.: \_\_\_\_\_ Subdivision: \_\_\_\_\_

No. of Copies Division: \_\_\_\_\_ Sepias Submitted: \_\_\_\_\_

- Yes  No  1. Is submittal required by contract?
- Yes  No  2. Is submitted item in accordance with Contract Requirements?
- Yes  No  3. Is submittal a substitution?
- Yes  No  4. If so, is reason for substitution included?
- Yes  No  5. Is consideration offered for substitution?
- Yes  No  6. Is submittal complete (warranties, test reports, model numbers, sizes, weights, dimensions, colors, supporting information required to show that performance characteristics comply with specified or scheduled performance)?
- Yes  No  7. Does submittal meet Specified Standards (ASTM, ANSI, UL, etc.)?
- Yes  No  8. Does submittal meet all code requirements?
- Yes  No  9. Are all accessories and ancillary devices as specified?
- Yes  No  10. Estimated procurement time: \_\_\_\_\_ (days/weeks)

<b>Submitted By:</b>	
<p>_____</p> <p>Title</p>	
<p>_____</p> <p>Signature</p>	<p>_____</p> <p>Date</p>

*Note: This form must be attached to all submittals. Submittals will be returned as incomplete when not accompanied by this form and when "YES" is not marked for all except 1 or 3 above.*