

Engineering & Capital Projects

Product Submittal Form

| Contractor Name: | |
|-------------------------|--|
| | |
| Project Name: | |
| | |
| SAP No. (WBS/IO/CC): | |
| | |
| Drawing Number: | |
| | |
| Resident Engineer Name: | |
| | |
| Submittal Number: | |
| | |

List name, type, purpose and quantity of product to be used (include model number if applicable):

List location on job product is to be used (Specify locations, sheets, stations, as applicable):

| Does this product deviate from the standards? | Yes | 🗌 No | If yes, explain how it deviates. |
|---|-----|------|----------------------------------|
|---|-----|------|----------------------------------|

Specify sections of standards that apply/govern this product.

| | Reference Specification Number(s) |
|-------------------------------------|-----------------------------------|
| Special Provisions | |
| Whitebook | |
| Greenbook | |
| ASTM | |
| AWWA | |
| UL^1 | |
| Other ¹ | |
| ¹ Attach relevant pages. | |

What standards govern this product's installation?

Provide installation instruction and requirements as required by the Contract Documents, ASTM or Manufacturer

| Independent Certified Lab Test Provided? | | Yes | | No |
|--|--------|-----|--|----|
| Certified or authorized Installer: | | Yes | | No |
| Has this product been used on City of San Diego projects for this type of application? | | | | |
| Yes No If yes, list project name | me(s): | | | |
| | | | | |
| | | | | |

Has this product been used at other municipalities for similar projects?

If yes, provide details (Municipality name, project name, and contact person including, email address and phone number).

| City Response: | | |
|------------------------|---------------------|----------------|
| NO EXCEPTION TAKEN | REJECTED | SUBMIT |
| MAKE CORRECTIONS NOTED | REVISE AND RESUBMIT | RESUBMIT |
| SUPPLY AS NOTED | | UNDER REVIEW |
| | | |
| CITY PROJECT MANAGER | CITY RES | IDENT ENGINEER |
| By: | By: | |
| Name: | Name: | |
| Date: | Date: | |