

DPMC 12/13	SUBMITTAL APPROVAL FORM New Jersey Department of the Treasury Division of Property Management & Construction Bureau of Design & Construction	Tracking No.	
		Project #	Contract #
	Date:		

PART I -- CONTRACTOR SECTION
SUBMITTAL IS SUBMITTED FOR CONSIDERATION

- | | | |
|---|--|---|
| <input type="checkbox"/> As specified / basis of design | <input type="checkbox"/> As a named approved equal | <input type="checkbox"/> As a substitution (Substitutions may be subject to a credit change order.) |
| | <input type="checkbox"/> As a non-named equal | |

SUBMITTAL TYPE

- | | | | |
|--|---|---------------------------------------|--|
| <input type="checkbox"/> Material catalog cut/info | <input type="checkbox"/> Test report | <input type="checkbox"/> Shop drawing | <input type="checkbox"/> Permit |
| <input type="checkbox"/> O&M manual | <input type="checkbox"/> Calculations | <input type="checkbox"/> Warranty | <input type="checkbox"/> HVAC balancing report |
| <input type="checkbox"/> Professional service | <input type="checkbox"/> Equipment catalog cut/info | <input type="checkbox"/> Other: _____ | |

GENERAL DESCRIPTION OF SUBMITTAL
REFERENCE

 Gen. Conditions Section / CSI No. / Drawing No.

WORK ON SITE: If this Submittal requires work on site, the work will be performed by:

- | | | |
|--|---|--|
| <input type="checkbox"/> Prime Contractor
Name: _____ | <input type="checkbox"/> Listed Sub-Contractor
Name: _____ | <input type="checkbox"/> Other Sub-Contractor
(If this box is checked complete Part 1B) |
|--|---|--|

PART 1B -- "OTHER SUB-CONTRACTOR" INFORMATION

PROVIDE THE FOLLOWING INFORMATION ABOUT OTHER SUB-CONTRACTORS

 Name _____
 Address _____
 Phone _____
 Email _____
 EIN # _____
 License/Registration # (if applicable) _____
 Certification # (if applicable) _____
 Public Works Registration # _____
 Business Registration # _____

PART 1C -- MATERIAL / EQUIPMENT INFORMATION

IF THIS SUBMITTAL IS FOR MATERIAL / EQUIPMENT PROVIDE THE FOLLOWING INFORMATION

 Name of Supplier / Vendor: _____
 Name of Contact at Vendor/ Supplier: _____
 Contact's Phone: _____
 Contact's Email: _____
 Manufacturer's Name: _____
 Manufacturer's website: _____

PART 2 -- ARCHITECT / ENGINEER SECTION

I have verified by checking the websites below that the Sub-Contractor listed in Part 1B has the following registrations:

- | | |
|--|---|
| <input type="checkbox"/> <input type="checkbox"/> Public Works Registration - NJ Dept. of Labor | http://lwd.dol.state.nj.us/lseapp/LSEERedirect.html?newPage=forms/RegisteredContractors |
| <input type="checkbox"/> <input type="checkbox"/> Business Registration - NJ Division of Revenue | https://www1.state.nj.us/TYTR_BRC/jsp/BRCLogin.jsp |

I have verified by checking the website below that the NJ Dept. of Labor has listed the Sub-Contractor named in Part 1B as:

- | | |
|---|---|
| <input type="checkbox"/> Not-Debarred <input type="checkbox"/> Debarred | http://lwd.dol.state.nj.us/labor/wagehour/wagerate/prevaling_wage_debarment_list.html |
|---|---|

I recommend that this submission be:

- | | | | |
|--|--|--|-----------------------------------|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Approved as noted | <input type="checkbox"/> Returned for resubmission | <input type="checkbox"/> Rejected |
| <input type="checkbox"/> Approved as Substitution -- may be subject to credit change order | <input type="checkbox"/> Approved pending DCA approval | <input type="checkbox"/> Other _____ | |

 Comments:

A/E Signature _____ Print Name _____ Date: _____

INSTRUCTIONS FOR COMPLETING THE SUBMITTAL APPROVAL FORM - DPMC 12/13

Part 1 Contractor Section (Parts 1, 1B and 1C to be completed by the Contractor):

Submittal is submitted for consideration:

- Indicate if this submittal is for the following:
 - As Specified/Basis of Design
 - As a Named Approved Equal
 - As a Non-named Equal
 - As a Substitution (Substitutions may be subject to Credit Change Order)

Submission type:

- Check all boxes that apply to the submission.

General description of submittal:

- Provide a brief summary of the submittal.

Reference:

- Indicate General Conditions Section/CSI No./Drawing No. Identify the Article, Spec Section or Drawing that represents the submission type, e. g., Article 4.11.2 Sleeve & Opening Drawing, Spec Section 115575 Condensate Pump, Drawing FP2.2 Ames Backflow.

Work on Site:

- If the work associated with this submittal will be done on site, indicate who will be performing it.
- If the “Other Sub-Contractor” box is checked, complete Part 1B.

Part 1B “Other Sub-Contractor” Information:

- If the “Other Sub-Contractor” box is checked in Part 1, provide the requested information.

Part 1C Material / Equipment Information:

- Provide the requested Vendor and Manufacturer information for the material or equipment related to this submittal.

Part 2 Architect / Engineer Section (to be completed by the Architect / Engineer):

- Verification of Registration’s & Debarment status by checking the appropriate box pertaining to the Sub-Contractor named in Part 1B ONLY.
- Click on the web links provided to verify that the Sub-Contractor is listed as having the required registration and is not listed as Debarred.
- Approval - Check the appropriate box to indicate your recommendations with regard to this submittal.
- Enter comments if applicable.
- Complete form by filling in the following fields: A/E Signature, Print Name and Date.