REQUEST FOR INFORMATION



140 Park Avenue ☐ New City, New York 10956 ☐ Tel 845-708-9200 ☐ Fax 845-708-9222 ☐ E-mail info@shilale.com			
Send all RFI's in writing to Michael Shilale Architects, LLP at the above address/fax number. Only this form will be accepted, and no questions will be entertained via telephone. By submitting this Request for Information, the Contractor is stating that they have performed a thorough review of the drawings and specifications and the information requested is not contained in the construction documents.			
Project:			RFI No.
MSA File No.:			
NYSED No.:			
Contractor:			
Contract for:	Hazardous Materials Abatement General Construction Plumbing		onstruction Other Other
Specification Reference	:	Drawing Reference:	
Description, complete with backup information as needed to fully convey the issue:			
Contractor's Proposed	Solution:		Sketch/Information Attached
Impact on Cost:		Impact on Schedule:	
Trades/Specialty Contractors Affected:			
Trades/Specialty Contractors Coordinated With:			
Submitted By: Requested Date of Response:			se:
Architect/Engineer's Re	esponse:		☐ ID No ☐ Attached ☐ Sketch/Information Attached
Ву:		Date:	_

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