

Vendor Material Submittal Checklist

Project Name

Vendor Name

Submittal Title

Submission Date

No.	Checklist Item	Available	Remarks
1	Material Datasheets	<input type="checkbox"/>	<input type="text"/>
2	Certificates of Compliance	<input type="checkbox"/>	<input type="text"/>
3	Test Reports	<input type="checkbox"/>	<input type="text"/>
4	Sample Submission	<input type="checkbox"/>	<input type="text"/>
5	Manufacturer's Instructions	<input type="checkbox"/>	<input type="text"/>
6	Warranty Documents	<input type="checkbox"/>	<input type="text"/>

Additional Comments

Checked By

Date

