School Name:_____

REQUEST FOR INFORMATION				RFI #:	
New Office Building Project				Subcontractor RFI#:	
				Number of Pages (Including Attachments):	
To:		Company:		Date Issued:	
Initiated by:		Company:		Respond by:	
Drawing/Sheet:		Spec Section:			

Subject:

Request:

Proposed Solution:

All impacts pending response.

Cost Impact: Yes ☐ No ☐ Schedule Impact: Yes ☐ No ☐ Signed: Ckd:

Response:

Approved for construction: No Yes Responding Party: Date:

Subcontractors affected by this Request for Information must notify PCL in writing within five (5) days of receipt identifying any cost and/or schedule impact. Otherwise they shall not be considered.

Copies to:						
						Field (**1**) copies
						Plan Room