TA-W4010-9 (12/2006)

Clear Form

New York State Thruway Authority • New York State Canal Corporation
P.O. Box 189
Albany, NY 12201-0189

SCHEDULE OF SUBMITTALS

Project ______________________________

Contract Number ______________________

Prepared by ______________________________

Date Prepared ____________________

Specification Section (Number & Title)	Submittal		Review & Approval By	Scheduled Due Dates				Actual Dates				
	Type	Copies		Submittal	Approval		Material Delivery	1st	2nd	3rd	Approval	Delivery
					Term	Date						