

NOMINATOR'S NAME	NOMINATOR'S COMPANY
NOMINATOR'S EMAIL	NOMINATOR'S PHONE NUMBER

### PROJECT INFORMATION

 PROJECT NAME
 ADDRESS

 LOCATION OF WORK WITHIN PROJECT (FLOOR #, WORK AREA LOCATION, BUILDING, ETC.)

## **CRAFTSMAN INFORMATION**

Want to recognize more than one key person for the craftsmanship on this job? For each additional person you want to recognize for this work, provide: first and last name and what they did on this job. May nominate up to 6 people on a team.

CRAFTSMAN NOMINEE NAME(S)	CRAFTSM	AN NOMINEE	EEMAIL(S)	CRAFTSMA	AN NOMINEE PHONE NUMBER(S)
NOMINATED WORK	I				
CRAFTSMAN'S EMPLOYER	CRAFTSMAN'S SUPERVISOR		PERVISOR	SUPERVISOR CONTACT NUMBER	
SUPERVISOR CONTACT EMAIL NOMINEE EMPLOYER ADDRESS					
PROJECT COMPLETION DATE DOES THE PROJECT NEED SPECIAL CLEARANCE? ONO OYES					
WILL HARD HATS, SAFETY GLASSES OR VESTS BE REQUIRED?       ONO       OVES       WORK SITE:       ONF SITE		DN SITE OFF SITE			
WILL THE WORK BE COVERED? ONO O	YES - IF YES, PRO	VIDE DATE W	ORK WILL BE CO	VERED	
DATE WORK WILL BE COVERED:					
INDIVIDUAL WHO WILL ARRANGE SITE AC	CCESS FOR TOURS	INDIVIDU	AL'S EMAIL		INDIVIDUAL'S PHONE NUMBER





### CATEGORY OF ENTRY

SITEWORK	WOODS AND PLASTICS	ELECTRICAL
O Underpinning, Foundations and Excavations	O Rough Carpentry	$\bigcirc$ Power Generation, Distribution and
<ul> <li>Landscaping (interior &amp; exterior)</li> </ul>	O Architectural Millwork	Switchgear
⊖ Hardscape	○ Casework and Laminates	C Lighting Systems
METALS	MECHANICAL	SPECIAL CONSTRUCTION
○ Structural Steel Framing	O HVAC-Sheet Metal/Ductwork	O Thermal and Moisture Protection
Ornamental Metal	○ HVAC-Piping	○ Elevator, Escalators and other Conveying
O Miscellaneous Metal Fabrication		Systems
	○ Fire Protection	Scaffolding and Rigging
FINISHES		⊖ Roofing
<ul> <li>Plaster (including Stucco and Dryvitt*)</li> </ul>	MASONRY	
<ul> <li>Drywall (including framing and finishing)</li> </ul>	O Unit Masonry	TECHNOLOGY
<ul> <li>Ceramic Tile and Terrazzo</li> </ul>	<ul> <li>Exterior Stone (including marble, granite</li> </ul>	Controls and Building Systems
<ul> <li>Flooring (including wood, carpet and</li> </ul>	and pavers)	⊖ Fire Alarm
resilient floor tile)	O Interior Stone and Marble	⊖ Security
O Painting and Wallcovering		<ul> <li>Telecommunications Systems</li> </ul>
Specialty Painting	DOORS AND WINDOWS	O Audio Visual
	O Doors and Hardware	
CONCRETE	O Windows and Storefronts (including glass	OTHER
<ul> <li>Concrete i</li> <li>Cast-in-Place Concrete (including Formwork)</li> </ul>	glazing and skylights)	Other*
and reinforcement)	○ Curtain Walls	(*for any work not listed)
O Special Concrete Finishes		
O Precast Concrete (fabrication and/or		
installation)		

# PHOTOS

Please provide at least two photos that showcase your project.

#### ○ I HAVE INCLUDED AT LEAST 2 PHOTOS

Your submission should include high-resolution photos that highlight the construction process and the finished project, including special techniques or unique conditions. Provide any other relevant marketing materials or additional supporting information including brochures, floor plans, renderings and site plans that can help in the judging process.

THIS CRAFTSMANSHIP NOMINATION IS PART OF AN OVERALL PROJECT NOMINATION OVES ONO

- more -





1. Specifically state the reasons why the nominated work is outstanding. Describe the craftsmanship skills that were utilized on this project (max 750 words):

2. Explain the complexity of the project (max 500 words):

3. Please explain any abnormal challenges or unforseen issues with this project (max 500 words):

4. Provide additional comments from owner, GC/CM, or architect on overall satisfaction of the work being nominated (Optional/max 500 words):

Nominations are judged on Craftsman's skills, complexity of the job and challenges faced on the project. Answers to Questions 1-3 are required.







# CONTACT INFORMATION FOR AFFILIATED COMPANIES

GENERAL CONTRACTOR COMPANY NAME	PROJECT MANAGER CONTACT NAME
EMAIL	PHONE NUMBER
ADDRESS	

ARCHITECT COMPANY NAME	CONTACT NAME
EMAIL	PHONE NUMBER
ADDRESS	-

ENGINEER COMPANY NAME	CONTACT NAME
EMAIL	PHONE NUMBER
ADDRESS	·

OWNER COMPANY NAME	CONTACT NAME
EMAIL	PHONE NUMBER
ADDRESS	

\*All nominations must be submitted by Friday, April 12, 2019. Nominations and supporting documentation should be emailed to Elisabeth Wainwright at ewainwright@bcebaltimore.org. Nominations can also be mailed to 6030 Marshalee Dr., Box 208, Elkridge, MD 21075. Emailed nominations are preferred.

