



THE ENGINEERING SOCIETY OF DETROIT®
FOUNDED IN 1895

36th ESD Construction & Design Awards Entry Form

Please complete this form and return it with the entry fee no later than 5 p.m. on Friday, February 26, 2010.

Checks should be made payable to The Engineering Society of Detroit and mailed with the nomination essay to 20700 Civic Center Drive, Suite 450, Southfield, MI 48076. If you are submitting more than one project, please use separate entry forms. Questions may be directed to Leslie Smith at 248-353-0735, ext. 152 or lsmith@esd.org. Additional information is available at www.esd.org.

List the name of the project and the company name of the owner, designer and constructor as you wish them to appear on the award plaques and promotional materials. If there is more than one significant participant in any of the categories below, include complete information for those participants. All significant participants must be included on the entry form. A registration form with more room for this information can be found on ESD's Web site at www.esd.org

PROPERTY		
Project Name		Date Completed
Address of Property		
OWNER		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail
DESIGNER		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail
CONTRACTOR		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail
ADDITIONAL: <input type="checkbox"/> OWNER <input type="checkbox"/> DESIGNER <input type="checkbox"/> CONTRACTOR		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail

ADDITIONAL: <input type="checkbox"/> OWNER <input type="checkbox"/> DESIGNER <input type="checkbox"/> CONTRACTOR		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail
ADDITIONAL: <input type="checkbox"/> OWNER <input type="checkbox"/> DESIGNER <input type="checkbox"/> CONTRACTOR		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail
ADDITIONAL: <input type="checkbox"/> OWNER <input type="checkbox"/> DESIGNER <input type="checkbox"/> CONTRACTOR		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail
ADDITIONAL: <input type="checkbox"/> OWNER <input type="checkbox"/> DESIGNER <input type="checkbox"/> CONTRACTOR		
Name		Title
Company		
Address, City, State, ZIP		
Phone	Fax	E-mail
SUBMITTER		
Submitter's Name		ESD Member Number
Submitter's Company & Address		
ESD Sponsor Name (if different)		ESD Member Number
ARCHITECT OF RECORD		
Architect or Engineer of Record		Contact Person
Phone	E-mail	
MARKETING CONTACT		
Marketing Contact		
Phone	E-mail	
SIGNATURES		

My signature signifies that I concur with this submission, that the project team worked well together and that the resulting structure met or exceeded my expectations.

Owner Signature	Designer Signature
Contractor Signature	Additional <input type="checkbox"/> Owner <input type="checkbox"/> Designer <input type="checkbox"/> Contractor
Additional <input type="checkbox"/> Owner <input type="checkbox"/> Designer <input type="checkbox"/> Contractor	Additional <input type="checkbox"/> Owner <input type="checkbox"/> Designer <input type="checkbox"/> Contractor
Additional <input type="checkbox"/> Owner <input type="checkbox"/> Designer <input type="checkbox"/> Contractor	Additional <input type="checkbox"/> Owner <input type="checkbox"/> Designer <input type="checkbox"/> Contractor

NOTE: A list of all major consultants, sub-contractors and material suppliers, clearly delineating each participant's role, along with their respective contact information, must be provided with all entries.