

# 2017 Award of Excellence in Construction

---

- Applications must be submitted and payment received no later than **June 30, 2017 at 5:00 p.m.**
- If you plan to pay by check, DO NOT submit an application online! Download the .pdf file, complete your application, and mail it with your check, by the June 30, 2017 deadline, to: ABC Indiana/Kentucky, 5001 N. Shadeland Ave, Indianapolis, IN 46226
- ABC recommends that applicants print the form for reference and draft responses in a word document. Copy and paste your responses when you are prepared to submit. You cannot save your submission on the website and return to it. All data will be deleted if you leave the page.

Please complete the information **exactly** as it should appear on the award.

## Name

\_\_\_\_\_

First Name

\_\_\_\_\_

Last Name

## Company Principal and Title:

\_\_\_\_\_

## Address

\_\_\_\_\_

Street Address

\_\_\_\_\_

Street Address Line 2

\_\_\_\_\_

City

\_\_\_\_\_

State / Province

\_\_\_\_\_

Postal / Zip Code

\_\_\_\_\_

Country

## Contact Person regarding application

\_\_\_\_\_

## Phone Number

\_\_\_\_\_

Area Code

\_\_\_\_\_

Phone Number

## E-mail

\_\_\_\_\_

## Project Name

\_\_\_\_\_

**Project Location**

---

**Name of Owner (firm):**

---

**Name of drop box listing  
architect or engineer**

---

---

## Entry Category (one category, one subset where applicable)

---

**COMMERCIAL (office buildings, banks, retail facilities, hotels, multi-family, residential/mixed use)**

Under \$3M

\$3-\$10M

\$10-\$25M

Over \$25M

**INDUSTRIAL (manufacturing plants, processing plants, testing facilities involving motor control, instrumentation)**

Under \$3M

\$3-\$10M

\$10-\$25M

Over \$25M

**INSTITUTIONAL (schools, churches)**

Under \$3M

\$3-\$10M

\$10-\$25M

Over \$25M

**HISTORICAL RENOVATION**

Under \$3M

\$3-\$10M

Over \$10M

**RENOVATION NON HISTORICAL**

Under \$3M

\$3-\$10M

Over \$10M

**HEALTHCARE: hospitals, nursing homes, etc.**

Under \$3M

\$3-\$10M

\$10-\$25M

Over \$25M

**FEDERAL GOVERNMENT/MILITARY**

Under \$10M

Over \$10M

**PRE-ENGINEERED BUILDINGS: shopping centers, institutional, banks, manufacturing plants**

**INTERIOR BUILDOUT**

**ELECTRICAL**

Commercial

Industrial

Institutional

**MECHANICAL**

Commercial

Industrial

Institutional

**SITE WORK/LANDSCAPE/HARDSCAPE: landscaping, parking lots, roadwork**

**PUBLIC WORKS – ENVIRONMENTAL**

**INFRASTRUCTURE: streets, highways, parks, dams, bridges**

**EXTERIOR FINISH: exterior walls, roofing, glazing**

**INTERIOR SPECIALTY SUBCONTRACTOR: drywall, tile, ceilings, floor coverings, walls,woodworking**

**OTHER SPECIALTY: construction not specifically referred to in the above categories**

---

## Project Description

---

**Project Cost**

\_\_\_\_\_

**Project Completion Date**

\_\_\_\_\_

Month

\_\_\_\_\_

Day

\_\_\_\_\_

Year

**Brief Scope of Work:**

**briefly describe the type  
of work completed during  
this project**

\_\_\_\_\_

**Project Significance: (15 points) briefly describe why this project is deserving of an award in regards to public relations, engineering, architecture, political importance, industry impact, etc. (1200 character max)**

---

---

## **Project Constructability**

---

*This section should be written from the contractor's point of view.*

**(60 points possible) Provide a description of innovative programs relating to personnel management, quality control, scheduling, value engineering, cash flow, site, owner, dollar value, obstacles to overcome, degree of difficulty, extenuating circumstances, etc. DO NOT INCLUDE company name in this section. Be brief yet specific. Remember: the judges are well versed in the construction industry so you do not need to explain construction process or terms in your submission. Please refrain from using abbreviations. (2500 character max)**

---

---

# Project Safety

---

(25 Points)

**1. Does your company have a written Safety and Health Policy Manual?**

**2. Did you develop a site-specific Safety and Health Policy Manual?**

**3. Were toolbox safety meetings held?**

**4. Was specialized craft training conducted on this project?**

**a. If so, type:**

---

**5. Did this project have a safety-related fatality?**

**6. Number of OSHA-recordable accidents on this project:**

---

**a. Number of OSHA-restricted day cases on this project:**

---

**b. Number of OSHA-lost time accidents on this project:**

---

**7. Does your company have a substance abuse policy?**

**8. Additional Safety  
Information pertaining to  
this project: (1000  
character max)**

---

---

## Project Member Involvement (General Contractor Submission only)

---

1. Percentage of total contract work self-performed on this project: \_\_\_\_\_

2. Percentage of work performed on this project by fellow ABC members: \_\_\_\_\_

3. Percentage of work performed by other contractors: \_\_\_\_\_

TOTAL: 100%

Please itemize participating members: Be sure to type the company name exactly as it appears in the "Current Membership Listing" & what % they were involved. \_\_\_\_\_

[Request Current Membership Listing](#)

If you plan to pay by check, DO NOT submit an application online! Download the .pdf file, complete your application, and mail it with your check, by the June 30, 2017 deadline, to: ABC Indiana/Kentucky, 5001 N. Shadeland Ave, Indianapolis, IN 46226