

2015 DESIGN AWARDS PROGRAM: CONCEALED IDENTIFICATION

Please fill out this form and place it in a sealed envelope; affix it to the inside back of the binder. Include a second copy of the blind form in an unsealed envelope marked "AIAVT office use" and place anywhere within the mailing package.

Project Name _____

Address _____ **Zip** _____

Architect or Firm: (to whom design should be credited)

Name _____

Address _____ **Zip** _____

Structural Engineer:

Name _____

Address _____ **Zip** _____

Mechanical Engineer:

Name _____

Address _____ **Zip** _____

Electrical Engineer:

Name _____

Address _____ **Zip** _____

Landscape Architect:

Name _____

Address _____ **Zip** _____

General Contractor:

Name _____

Address _____ **Zip** _____

Second General Contractor (if applicable):

Name _____

Address _____ **Zip** _____

Photographer (Note: If more than one photographer is involved, please indicate):

Name _____

Address _____ **Zip** _____

Client: (Awards made up for the clients can remain private) Indicate: ☐ Private ☐ Ok to announce at Awards Gala

Name _____

Should a submission receive an award or be chosen for publication, credits and materials for the award program and publicity will be taken from the submission and this identification form. There will be no further communication with the entrant to verify the information contained in the submittal and on this form. Accuracy is essential. By making a submission, each entrant agrees that the information contained on the identification sheet is correct and complete, and that the entrant will hold harmless AIAVT for any and all damages arising out of use of the information on this sheet and in the submittal. Any errors or omissions are the responsibility of the entrant. Each entrant further certifies that permission has been obtained from the owner and the photographer to publish photographs specifically for the Design Awards Program and to obtain further information about a submitted project and releases and authorizes AIAVT to use all such materials.

Entrant: _____ Submitted By: _____ Entrant Address: _____