

## 2015 Nomination Form

### Property Nominated

Property Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Category:

(as described in the Nomination package)

- Physical Access – New Construction
- Physical Access – Renovation
- Sensory Access – New Construction
- Sensory Access – Renovation
- Small Project
- Community Recognition

Reason for Nomination:

(if more space is required, please provide additional documentation)



**Architect/Landscape Architect/Designer**

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

**Team Members Directly Associated With Accessibility Features**

Name: \_\_\_\_\_ Role: \_\_\_\_\_

Name: \_\_\_\_\_ Role: \_\_\_\_\_

Name: \_\_\_\_\_ Role: \_\_\_\_\_

Name: \_\_\_\_\_ Role: \_\_\_\_\_

**Nominated By**

Name: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

I understand that the material may be retained by the City of Winnipeg Access Advisory Committee for promotional and publicity purposes and may be published by the Committee (including on the web). I hereby consent to the submission, judging and/or publication (including the web) of the material submitted.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Deadline for 2015 nominations:**  
**Monday, June 15, 2015**

For more information, contact:

**Chris Sobkowicz**  
*Access Advisory Committee Coordinator*

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**TTY: (204) 986-1311**

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