

## 2016 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:

(Max. 200 word executive summary of the project's scope)

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**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 2016 nominations:**  
**Thursday, June 30, 2016**

For more information, contact:

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

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