



## NOMINATION FORM

Please submit your nominations for any or all categories. The approved nominations will be asked to provide a brief bio of their activities during the year in accord with criteria. The bios of the top candidates under each category will be evaluated by the NAIOP Awards Committee. Please feel free to nominate yourself, your associates or your company.

**AWARD CATAGORIES:**

Nomination Forms will be received in hard copy via fax to the NAIOP office. Every nomination will then receive a nominee questionnaire to be completed. Qualified nominations will be submitted to and voted on by the Awards Committee. Some optional awards may not be given out this year based on the amount of nominations.

**PLEASE NOTE: Check only one box per nomination form (please use a separate form for each nomination) MAKE SURE YOU FILL IN THE ENTIRE FORM COMPLETELY & LEGIABLY.**

- Office Broker of the Year
- Industrial Broker of the Year
- Office Lease/Sale of the Year
- Industrial Lease/Sale of the Year
- Office Project of the Year
- Industrial Project of the Year
- Sustainable Project of the Year
- Emerging Professional of the Year
- Public/Private Partnership of the Year
- Mixed-use Project of the Year
- Historic Rehabilitation Project of the Year
- Redevelopment Project of the Year
- Investment Broker of the Year
- Developer of the Year
- Land Sale of the Year

1. PROJECT NAME and (Person’s name and company responsible)

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**OR**

2. PEER NAME AND COMPANY NAME \_\_\_\_\_

3. NAME OF PERSON SUBMITTING THIS NOMINATION \_\_\_\_\_

4. YOUR COMPANY \_\_\_\_\_

5. TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

**TRUTH OF INFORMATION RELEASE**

*To the best of my knowledge, the information provided herein is true and complete. All financial information contained herein shall remain confidential unless I agree to its release. I understand that the information I provide on this application may be used by the sponsors and the independent panel of judges in selecting award recipients and I consent to the use of such information for that purpose. I further consent to the use of such information for research, educational or any other purpose as long as such use does not divulge my identity or the identity of the company to any other person other than the sponsors, the judges, and their respective affiliates. If I am selected as a finalist or award recipient, I hereby authorize the use of - in connection with the Awards of Excellence program - my name, my company's (or organization's) name, non-financial information, photographs, video recordings and audio recordings of me from whatever source. I agree that no compensation shall be due me or my company for such usage.*

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

**PLEASE SUBMIT YOUR NOMINATIONS VIA FAX TO 904 730 8053**