

CHAPTER/REGIONAL TECHNOLOGY AWARD – SHORT FORM

1. Category (Check One and Indicate New or Existing, if applicable)

- I. Commercial Buildings _____ New or _____ Existing
- II. Institutional Buildings _____ New or _____ Existing
- III. Health Care Facilities _____ New or _____ Existing
- IV. Industrial Facilities or Processes _____ New or _____ Existing
- V. Public Assembly _____ New or _____ Existing
- VI. Residential _____ New or _____ Existing
- VII. Alternative and/or Renewable Energy Use _____ New or _____ Existing

1. Name of Building or Project: _____
City/State: _____

1. Project Description:

- a) **Project Study/Design Period:** _____
- a) **Has the project been completed (Y/N)** _____
- a) **If YES, date completed:** _____
- a) **If NO, Scheduled completion (or other explanation):** _____

1. Entrant (ASHRAE Member with Significant Role in Project):

Name: _____ **Chapter Membership #** _____
Address: _____
Telephone: (W) _____ **(H)** _____
Company: _____
Title: _____
Member's Role in Project: _____
Member's Signature: _____ **Date:** _____

1. Engineer of Record: _____

By affixing my signature above, I certify that the information contained in this application is accurate to the best of my knowledge. In addition, I certify that I have discussed this entry with the owner and have received permission from the owner to submit this project to the ASHRAE Technology Awards Competition.

**Return form to: Mark A McLeod, Building Control Technologies, Automated Logic Corporation
1 Frassetto Way Unit J, Lincoln Park New Jersey 07035
Ph (973) 633-7730, Fax (973) 633-7732, e-mail mmcleod@bct-alc.com**