

Associated Builders & Contractors, Empire State Chapter 2022 Construction Excellence Awards Project Submission Requirements and Forms

Each year, the Empire State Chapter of Associated Builders and Contractors hosts its annual Construction Excellence Competition in which member companies submit their best work to be judged against the best-of-the-best in New York State.

The Empire State Chapter is now accepting submissions and we invite member companies to submit their best projects for consideration in our 2022 competition.

#### THE DEADLINE TO SUBMIT PROJECTS IS FRIDAY, JULY 29.

#### **Benefits**

Participation in the Construction Excellence Competition provides a unique tool in building relationships with key clients, and is a tremendous opportunity to build morale within your company as your employees earn the public recognition they deserve for delivering a successful job.

A Construction Excellence Award will help grow your business by raising your company's profile among industry leaders. Winners will be recognized during the Empire State Chapter's Construction Excellence Celebration in September.

#### **Purpose**

This competition is intended to increase awareness in our local communities regarding the quantity and quality of work being produced by members of the Empire State Chapter of ABC. By calling attention to excellence, we will continue to set the standard throughout the construction industry. Projects must be substantially completed by July 29, 2022.

Only projects completed in the last two years are eligible.

(JULY 29, 2020 - JULY 29, 2022)

NO REPEAT SUBMISSIONS WILL BE ACCEPTED.

#### <u>Contents</u>

- Judging Criteria
- Project Information Form
- Project Award Category Form
- Project Safety Form

# **PROJECT SUBMISSION REQUIREMENTS**

# **Completion of Project**

To be eligible for consideration, the project must be substantially completed between July 29, 2020 and July 29, 2022.

## **Project Entry Steps**

- 1. Complete application (select only one category per project submission)
- 2. Include all required supporting documents
- 3. Submit application and supporting documents via Dropbox (All files and documents must be submitted no later than Friday, July 29, COB)

CLICK TO SUBMIT VIA DROPBOX

# **JUDGING CRITERIA**

# **Condensed Project Narrative**

- Microsoft Word document, no more than 400 words.
- A project description describing what is special or unique about your project that can be used in the media presentation and program if you are a winner.

# Photographs

- Submit NO MORE THAN 5 high resolution photographs of the project.
- Only .JPEG or .PNG file formats will be accepted.
- These MUST be submitted as separate files please do not put photos into a Word document.

#### **Project Safety**

- No project involving a prime, multi-prime, subcontractor or any trade-related work (regardless of the type of contract) with a safety-related fatality is eligible for a Construction Excellence Award.
- Complete the separate Project Safety section of this application on page 5.
- You must include your company's OSHA Form 300A (project specific, if available) for the year(s) the project was under construction.

#### **References (Preferred)**

- Include letters of recommendation from third parties involved with the project, such as the owner and design team. If the owner is unable to provide a letter of recommendation due to company policy, include a letter from the owner on its letterhead stating it is unable to provide a reference.
- Provide a short description of how the author of each letter was involved in the project.

#### Supplemental Materials (Optional)

- Up to five single-sided pages.
- Provide any miscellaneous supporting materials: diagrams, graphics, media coverage, awards, etc.

# **PROJECT INFORMATION FORM**

Fax:

Please provide the requested information exactly as it should appear in award-related materials and on the award. If you have any questions regarding this application, you may call ABC Empire State Chapter's office at (585) 301-6005 or e-mail Brian Sampson at sampson@abcnys.org.

### **Contractor Information:**

Name of Contractor:					
Company Principal Name	and Title:				
Street Address:					
City:	State:	Zip:			
Phone:	Fax:		E-mail:		
Indicate if you are a woma	WBE	MBE			

Primary Submission Form Contact Information: (Who should be notified once judging is complete)

Contact Nan	ne:		
Title:			
Phone:			
E-mail:			

# **Project Information:**

Name of Project: Project Location: (City & State) Final Contract Amount: \$ Award Entry Category: (Categories listed below) Name of Primary Architect: (Official firm name) Name of Primary Engineer (Official firm name) Name of General Contractor: (If applying company is a specialty contractor) Name of Client/Owner: (Official firm name) Starting Date of Construction: Substantial Completion Date of Construction:

# **Other Project Information:**

Was this a design-build project, with design and construction services under one contract with a single point of responsibility? Yes No Was this a Leadership in Energy and Environmental Design (LEED) project through the U. S. Green Building Council? Yes No If it was a LEED project, indicate the status of the LEED certification: Under Review Certified as Level Did Not Submit

# **PROJECT AWARD CATEGORY FORM**

Include this form in the project entry, immediately behind the Project Information Form. ABC Empire State Chapter reserves the right to change an entry's original category if it determines that a project's opportunity to win will be enhanced by the change to the new category. ABC Empire State Chapter also reserves the right to redistribute the contract volume levels within a category. **Check ONLY ONE category**.

# **GENERAL CONTRACTING/CONSTRUCTION MANAGEMENT**

# **Mega-Projects**

All projects, regardless of type, more than \$100 million

### Commercial

Office buildings, banks, retail facilities, hotels and mixed use

**Community/Public Service** Philanthropic projects that enhance the community, using substantial resources donated by the contractor

Fed. Government/Military All projects owned by the federal government, with the exception of transportation infrastructure and utilities

#### Healthcare

Hospitals, assisted living, nursing homes and other licensed medical facilities

#### Hist. Restoration/Reno.

Restoration of buildings registered as historical, or eligible to be registered as historical

#### Industrial

Manufacturing plants and facilities, refineries and similar types of construction

Infrastructure: Heavy Streets, highways, parks, dams and bridges

#### Institutional

Projects owned by schools, churches and local governments, with the exception of healthcare facilities.

#### Pre-Engineered Building Institutional, shopping centers, banks and manufacturing plants

#### Pub. Works/Environmental

Water treatment plants and sewage treatment plants

### Renovation

Non-historical, existing buildings where more than 50% of the contracted dollar value was used for renovation or restoration

#### Residential

Residential, including independent living retirement communities

# **Other Construction**

Construction not specifically referred to in the above categories. Examples include theme parks, zoos, skate parks, water parks and other unique types of projects

# SPECIALTY CONTRACTING

#### **Community/Public Service**

Philanthropic projects that enhance the community, using substantial resources donated by the contractor

#### **Electrical: Commercial**

Schools, hospitals, outdoor lighting, institutional, shopping centers

#### **Electrical: Industrial**

Manufacturing plants, processing plants, instrumentation and testing facilities involving motor control

### Mechanical: Commercial

Manufacturing plants, processing plants and pneumatic controls

#### Mechanical: Industrial

Manufacturing plants, processing plants and pneumatic controls

#### **Exteriors** Masonry, precast or stone; all other exterior finishes

Interiors Acoustical, drywall, millwork or plaster; all other interior finishes

## Sitework/Land/Hardscape Interior/exterior, landscaping and parking lots

#### Other Specialty: Commercial

Commercial construction not specifically referred to in the above categories

#### Other Specialty: Industrial Industrial construction not

specifically referred to in the above categories



# **PROJECT SAFETY FORM**

Complete this form in its entirety.				
<ul> <li>Did this project have a safety-related fatality?</li> <li>If yes, do not submit your entry for this competition.</li> </ul>		Yes	No	
<ul> <li>Include copies of the OSHA Form 300A for your company project was under construction.</li> </ul>	/ (project specific	, if availa	ble) for the year	(s) the
• Does your company have a written Safety and Health Po If yes, include its table of contents or provide a one-page		Yes	No	
<ul> <li>Did you develop a site-specific Safety and Health Policy I If yes, include its table of contents or provide a one-page</li> </ul>		Yes	No	
<ul> <li>Were toolbox safety meetings held with employees?</li> </ul>		Yes	No	
Were these meetings documented?		Yes	No	
Frequency of meetings: Include a one-page summary or an example up to two pa	iges.			
<ul> <li>Was specialized training conducted on this project? If yes, indicate on a separate page.</li> </ul>		Yes	No	
Indicate total man hours for all disciplines included in you (GCs and construction managers must also include all sp			on this project.)	
Indicate your SIC code:				
<ul> <li>Indicate number of OSHA-recordable accidents on this provident counts for all specialty contractors under the special spe</li></ul>		or this an	d the next three	items.)
<ul> <li>Indicate number of OSHA restricted day cases on this pro</li> </ul>	oject:			
<ul> <li>Indicate number of OSHA lost-time accidents on this proj-</li> </ul>	ect:			
<ul> <li>Compute the project's Total Recordable Incident Rate: (TRIR = Number of recordable accidents x 200,000 / total man-hours for</li> </ul>			t)	
• On a separate page, provide the project's organizational	chart identifying t	he perso	n responsible fo	or safety.
Provide information about the person responsible for safe	ety on this project	and atte	sting to acciden	t rates:
Name: Title:				
Phone: E-mail:				
Signature:				
Does your company have a written substance abuse poli	cv2	Yes	No	
If yes, provide a copy of the table of contents.				

Additional information regarding any innovative safety and health programs used on this project or the company's overall safety program may be included.