

Phone

E-mail

Fax

## Missouri Chapter APWA Public Works Project of the Year Nomination Form

Project Name		Primary C	ontractor		
		Agency/Organization			
Project Completion Date Must be substantially completed (90%) and available					
		Contact Nar	ne		
Public Agency					
		Title			
Project Category		Address (if p	Address (if post office box, include street address)		
(check one)					
☐ Structures ☐ Transportation ☐ Environmental		City	State	Zip Code	
Historical Restorati	ency	Phone		Fax	
Construction/Repair		E-mail			
Project Division (check one)  Less than \$1,000,000  \$1,000,000, but less than \$3,000,000  More than \$3,000,000		Primary Co			
		Agency/Orga 	nization		
Managing Agency		Contact Nar	ne		
		Title			
Agency/Organization		Address (if p	Address (if post office box, include street address)		
Contact Name		City	State	Zip Code	
 Title			Jidle		
		Phone		Fax	
Address (if post office box, i	nclude street address)	E-mail			
City State	Zip Code	Forward a single PDF file	of the completed N	omination Form and	

documentation to:

Mr. Stephen Stumpf, PE - sstumpf@hrgreen.com

Contact Stephen via email or phone 636-519-0990 with any questions.