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**TEXAS
REGISTERED
ACCESSIBILITY
SPECIALIST
ASSOCIATION**
a 501(c)(3) organization



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Executive Director
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NOMINATION FORM - 2010

**TRASA / TGCPD - ACCESSIBILITY AWARDS PROGRAM – A
Joint Program of the Texas Registered Accessibility
Specialists Association (TRASA) and the Texas Governor’s
Committee on Peoples With Disabilities (TGCPD)**

PROCESS – Please gain the needed application forms and pay the \$50 / project entry fee by credit card on the www.TRASAtexas.com website; or, by check made out to TRASA if mailed or hand-delivered.

GOAL – To honor some of the most accessible construction projects in the State of Texas. Each of the submittals will be reviewed and on-site compliance will be verified by independent Registered Accessibility Specialists. Please provide the following required information and return this Form in electric format to Fred D. Cawyer, RAS at fredcawyer@aol.com; or, physically mail or deliver all required forms and photos in CD form to the TRASA Executive Office in Austin, Texas by:

Monday - 12 July 2010 @ 4:00pm

SITE / PROPERTY PROJECT INFORMATION:

Property Name: _____ **EABPRJ#:** _____

Property Address: _____

PROPERTY OWNER INFORMATION:

Name: _____ **Signature:** _____

Address (including zip code): _____

Telephone (day) - _____ **(evening) -** _____ **(cell) -** _____

Email Address: _____

Has the Property Owner been informed of this nomination? Yes ___ No ___

NOMINATOR INFORMATION:

Applicant’s Name & Address - _____

Affiliation / Relation to the Property - _____

Telephone (day) - _____ **(evening) -** _____ **(cell) -** _____

Email Address: _____

NOMINATION FORM – 2010 – Continued:

TENANT INFORMATION (If applicable):

Company / Firm Name / Primary Contact:

Address (including zip code):

Telephone (day) - (evening) - (cell) -

Email Address:

Has the tenant representative been informed of this nomination? Yes _ No _

DESIGN PROFESSIONAL INFORMATION:

Firm Name / Primary Contact:

Address (including zip code):

Telephone (day) - (evening) - (cell) -

Email Address:

Has the design professional been informed of this nomination? Yes ___ No ___

CONSTRUCTION TEAM / GENERAL CONTRACTOR INFORMATION:

Company Name / Primary Contact:

Address (including zip code):

Telephone (day) - (evening) - (cell) -

Email Address:

Has the construction team been informed of this nomination? Yes ___ No ___

**REGISTERED ACCESSIBILITY SPECIALAIST / RAS-OF-RECORD
AND TRASA MEMBER INFORMATION:**

RAS's Name: RAS #:

RAS's Address (including zip code) -

Telephone (day) - (evening) - (cell) -

Email Address:

Has the RAS-of-Record been informed of this nomination? Yes ___ No ___



NOMINATION FORM – 2010 – Continued:

ADDITIONAL INFORMATION

Please provide any additional information as attachments to this form. Nomination materials may be mailed or emailed. **ELIGIBLE PROPERTIES MAY INCLUDE ANY:** (1) public owned or privately owned building or facility or that is leased or occupied by a state agency; (2) a place of public accommodation; or, (3) a commercial facility – that is “subject” to the Texas Department of Licensing and Regulation – Architectural Barriers (Removal) Program, and that was designed and constructed to be compliant with at least the minimum accessibility compliance with the Texas Accessibility Standards (TAS) and Plan Reviewed and Inspected by a State of Texas Registered Accessibility Specialist and a member in good standing of TRASA.

DESCRIPTION OF THE PROPERTY (Maximum 4,000 characters) -

Briefly describe the property’s main accessibility characteristics and what specific challenges that may have existed to meet the unique physical accessibility elements / issues.

ACCESSIBILITY COMPLAINT THAT MAKES THE PROPERTY UNIQUELY WORTHY OF RECOGNITION (Maximum 4,000 Characters)

Briefly state the significance of the property and its relevance to meeting the TAS accessibility compliance. Describe some of the unique solutions to meet the accessibility issues.

TO BE CONSIDERED FOR SELECTION, PLEASE INCLUDE:

- Ten but no more than 20 photo images of the property (.jpegs of 300 dpi minimum on a CD and transmitted by e-mail)
- Completed Nomination Form and any other documentation
- Map showing location (may be downloaded from the Internet)

Please be aware that all application materials become the property of TRASA and that the nominator grants TRASA and the Texas Governor’s Committee on People with Disabilities unlimited use of images. Please also provide the name of the photographer to be properly credited in all publications.

PROPERTY OWNER SIGNATURE:

Printed (Signature) (Date)

NOMINATORS SIGNATURE:

Printed (Signature) (Date)

PLEASE RETURN NOMINATION FORMS TO:

Via Email to: fredcawyer@aol.com / Phone: 972.285.2445

Or physically hand delivery / mail electronic CD with all information to:

TRASA - Attn: Ms. Shirley Knox – Executive Director
3355 Bee Cave Road, Suite 301B / Austin, TX 78746

