



# 2010 Professional's Choice Awards Application Remodeling Projects

Judging for Remodeling Projects Nominees is by Appointment the Week of **July 26, 2010**  
**Judge Will Contact Builder To Set Appointment Time**

**Builder Firm Name:** \_\_\_\_\_ **Web Site:** \_\_\_\_\_

**Builder Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Location of Nominee:** (Please select one - see Homer locator map and mark location with an "X")

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> City of St. Louis          | <input type="checkbox"/> West St. Louis County | <input type="checkbox"/> Montgomery County | <input type="checkbox"/> Clinton County, IL   |
| <input type="checkbox"/> St. Louis County           | <input type="checkbox"/> St. Charles County    | <input type="checkbox"/> Pike County       | <input type="checkbox"/> Jersey County, IL    |
| <input type="checkbox"/> North St. Louis County     | <input type="checkbox"/> Franklin County       | <input type="checkbox"/> Warren County     | <input type="checkbox"/> Madison County, IL   |
| <input type="checkbox"/> South St. Louis County     | <input type="checkbox"/> Jefferson County      | <input type="checkbox"/> Washington County | <input type="checkbox"/> Monroe County, IL    |
| <input type="checkbox"/> Southwest St. Louis County | <input type="checkbox"/> Lincoln County        |  | <input type="checkbox"/> St. Clair County, IL |

Nominee Street Address \_\_\_\_\_ Direction Unit Faces \_\_\_\_\_

Directions to Nominee - **PLEASE BE SPECIFIC** - From the I-70/270 Interchange: \_\_\_\_\_

**Name of Remodeling Project:** \_\_\_\_\_

(How name should appear in *Builder News*, press releases and on HBA Web site)

Subdivision or Community (if applicable) \_\_\_\_\_ Date Completed \_\_\_\_\_

**Brief description of nominee, emphasizing uniqueness and owner requirements:**

(please attach another sheet of paper if needed)

**Brief description of project requirements and obstacles overcome:**

(please attach another sheet of paper if needed)

*I understand the HBA shall bear no responsibility should an injury occur while on the premises of a Professional's Choice nominee.*

Remodeler's Signature \_\_\_\_\_

**Return this form with:** (check one box only)

- \$650 for Builder Nominee Only       Add \$50 to Nominee Fee for Architect name: \_\_\_\_\_  
*Architect must be an HBA member. Architect name will appear on the HBA Web site, in Builder News and press releases if nominee wins.*

**I am submitting photos:**     electronically to [HoganJ@hbastl.com](mailto:HoganJ@hbastl.com)     one color BEFORE and one color AFTER photo with this application

**APPLICATION, CHECK AND PHOTOS MUST BE RECEIVED AT THE HBA BY 5 P.M. ON FRIDAY, JULY 9, 2010**  
**NO REFUNDS WILL BE GIVEN AFTER 5 P.M. ON MONDAY, JULY 12, 2010**