

SUBMISSION FORM

DETAILS OF BUILDINGS:
Name of Building Location/ Area
Category A B C D E
Please indicate if these products were used in the project
Clean COLORBOND® Award
OTHERS (please specify)
Please specify where the above are used
DETAILS OF ARCHITECT, BUILDING OWNER, ENGINEER & BUILDER:
1 Name of Architect
Address
Tel. & Fax. No
2 Name of Building Owner Address
Address
Tel. & Fax. No
3 Name of Engineer
Address
Tel. & Fax. No
4 Name of Builder
Address
Tel. & Fax. No
 I/We as the nominator of the above building declare the following: I/We hereby agree to abide by the Rules & Regulations of the PAM Architectural Steel Awards 2013 I/We enclose herewith the colour photographs & CD of the images I/We confirm that the photographer has given his consent for the use of the submitted photographs and any resulting exhibitions or publications undertaken by PAM I/We confirm the building is designed with/without any*design collaboration with either local or foreign design consultant.*delete whichever is not applicable.
Nominator's Signature PAM Membership No
Name: