



*Distinguished Business of the Year Application*



This award will be given to a business that supports individuals within their organization that contribute to the Local, State and National associations. Please be sure to complete all areas of the application.

**Should you need additional space for criteria, please note and attach a separate sheet.**

Candidate Information	
Contact Name	
Company	
Address	
City, St & Zip	
Phone	
Fax	
Email	

Submitted By	
EO or President	
Company	
Address	
City, St & Zip	
Phone	
Fax	
Email	

About the Company
Describe the nominated company in 50 words or less.
Describe how this business has provided: a) Outstanding service to the Builders Association of Minnesota and its local associations. b) Displayed excellence in leadership. c) Increased productivity and has a positive impact on the community through good business practices. Describe in 100 words or less.

**About the Company**

Describe in 50 words or less how this business regularly attracts positive attention and interest to the association as a result of their business practices.

Describe in 50 words or less how this business shows its support not only financially, but also by allowing and encouraging its employees to be active in the HBA's, which enriches, protects or entertains the members of the Builders Association of Minnesota and its local associations.

Please provide the names of all individuals within the business who have actively contributed their time by participating on committees or volunteered for any other local, state or national HBA events or programs. (1 point each)

1.	5.	9.	13.
2.	6.	10.	14.
3.	7.	11.	15.
4.	8.	12.	16.

**Company Membership**

At which local associations does the company hold membership? (1 point per local)

<input type="checkbox"/> ABA	<input type="checkbox"/> CMBA	<input type="checkbox"/> HBA	<input type="checkbox"/> MMBA	<input type="checkbox"/> NMBA	<input type="checkbox"/> SCBA	<input type="checkbox"/> VBA
<input type="checkbox"/> BATC	<input type="checkbox"/> CRBA	<input type="checkbox"/> LRBA	<input type="checkbox"/> MRBA	<input type="checkbox"/> RAB, Inc.	<input type="checkbox"/> SNBA	<input type="checkbox"/> WCBA

**Supporting Materials - Please attach separately and indicate what is included with check marks**

- Statement from HBA Executive Officer or Board of Directors regarding the applicant's merits. (Required)
- Letters of recommendation or other additional information regarding the candidate's qualifications. (2 minimum required)
- Company Logo (required)

**Submitter's Affidavit**

Signature	
Date	
Print Name	

Mail completed entry with supporting materials to:  
 Awards  
 Builders Association of Minnesota  
 525 Park St, Ste 150  
 St. Paul, MN 55103