



## AWARDS OF EXCELLENCE FOR OUTSTANDING CONTRIBUTIONS & SCHOLARSHIP APPLICATIONS

NUCA of North Texas Awards of Excellence for 2017 will be presented at the 2018 NUCA of North Texas Awards Banquet. The awards honor outstanding contractor/associate member companies and individuals who have made significant contributions at the **chapter level** to the North Texas industry and/or association.

### AWARD CATEGORIES & CRITERIA

**Awards are presented annually for:**

**“Company”** to a member contractor, associate, and an M&WBE company, who have made significant contributions at the chapter level to the North Texas construction industry and/or our association.

**“Individual”** to a contractor or associate member employee who has made a significant contribution at the chapter level to the North Texas construction industry and/or association. (1) Award will be given for each of the following categories: Superintendent, Safety Professional and Estimator.

**“Project”** to contractor members, based on project value (\$0-\$1m, \$1-\$5m, \$5-\$10m, \$10-\$25m), for projects that went well or had particular challenges and creative unique solutions.

**“Job Provider”** to an owner or GC who has a great vision for the community and interaction with our member

**“Scholarship”** to a NUCA member employee or employee’s dependent for education in the construction industry.

**“Safety”** to a contractor company based on safety record/criteria relative to the size of the company.

### RULES FOR SELECTION

1. Any member of NUCA may nominate themselves or any other member company or individual for any or all of the awards.
2. The nominations shall be submitted in writing (printed or typed) using the official nomination form. Incomplete, illegible, or non-responsive submissions will not be considered by the Awards & Recognition Committee.
3. A candidate may be nominated by more than one member, but the selection of award recipients is based solely on contributions to the industry, not on the number of nominations received.
4. Only the award recipients will be honored. There will be no honorable mentions or other acknowledgement of award nominees. The identity of nominees shall remain confidential.
5. Contractor or Associate member companies or individuals will not be selected for more than (1) award in each category. Members are encouraged to submit application for awards in multiple categories.

### ENTRY SUBMISSION

All nominations should be sent to: NUCA of North Texas, Awards & Recognition Committee, P.O. Box 331694, Fort Worth, TX 76163, or emailed to [info@nucanorthtexas.com](mailto:info@nucanorthtexas.com) subject ‘AWARDS’. Receipt confirmation emails will be returned to the sender. If you have any questions, please call 682.402.4293. Forms may be duplicated to submit additional names.

### DEADLINE

All nominations must be received in NUCA’s office by the close of business (5:00 p.m., CT) Friday **March 2, 2018**.

### JUDGING

The Awards Committee — comprised of our Awards & Recognition Committee and for Safety Awards member safety experts. Any members of the committee who is nominated by company or individual for an award will be recused from the vote for that award. All awards need not be made every year, and shall be awarded only when deemed appropriate by the committee.

### AWARD PRESENTATION

Award recipients will be honored publicly at the North Texas Awards Annual Meeting, and will receive a handsome award acknowledging their achievement. The winners will also be featured in our NUCA of North Texas newsletter and website.



**MEMBER COMPANY OF THE YEAR NOMINEE:** \_\_\_\_\_

Contractor    Associate    M&WBE

**Nominated By:** \_\_\_\_\_ **Company:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Award Nominee Information**

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact for report confirmation (if necessary):

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

How many years (if known) has the nominated company been in business? \_\_\_\_\_ Been a NUCA member? \_\_\_\_\_

AI. Describe Contractor/Associate Company's background & contribution to the North Texas utility/excavation construction industry.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All. Describe Contractor/Associate Company's involvement with & contribution to NUCA North Texas.

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If additional .space is needed; add another sheet. Original resolution pictures (max 3) in jpg format are appreciated.  
Submit to [info@nucanorthtexas.com](mailto:info@nucanorthtexas.com) or NUCA NTX P.O. Box 331694, Fort Worth, TX 76163

**\*\*DEADLINE March 2, 2018\*\***

Announcement and Presentation at the Cook Off and Annual Meeting April 6, 2018



**MEMBER INDIVIDUAL OF THE YEAR NOMINEE:** \_\_\_\_\_

Superintendent     Safety Professional     Estimator

**Nominated By:** \_\_\_\_\_ **Company:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Award Nominee Information**

**COMPANY:** \_\_\_\_\_ **STATE:** \_\_\_\_ **ZIP:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

Contact for report confirmation (if necessary):

**NAME:** \_\_\_\_\_ **PHONE:** (\_\_\_\_) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

How many years (if known) has the nominated individual been in the business? \_\_\_\_\_ Been a NUCA member? \_\_\_\_\_

**BI. Describe the Individual Member's background in nominated field and the overall utility/excavation construction industry.**

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**BII. Detail the Individual Member's involvement with and contribution to NUCA North Texas.**

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If you filled out an application for the National Top Job Award, just fill out your company name, project value and 'CI'.

**PROJECT OF THE YEAR NOMINEE:**

\$0-\$1m     \$1-\$5m     \$5-\$10m     \$10-25m     Ditch Digger of the Year

**Nominated By:** \_\_\_\_\_ **Company:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Award Nominee Information**

**COMPANY:** \_\_\_\_\_ **STATE:** \_\_\_\_ **ZIP:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ - \_\_\_\_\_

Project Contact for report confirmation (if necessary):

**NAME:** \_\_\_\_\_ **PHONE:** (\_\_\_\_) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

How many years (if known) has the nominated company: been in business? \_\_\_\_\_ been a NUCA member? \_\_\_\_\_

CI. Describe project background & company's contribution to the project being considered for the Project of the Year.

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**CII.** Provide project details: value, type, location, scope, schedule, complexity, challenge and additional factors. Provide 2-4 original resolution pictures (email: info@nucanorthtexas.com) to accompany your application.

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If additional .space is needed; add another sheet. **Original resolution pictures (2-4) in jpg format are required.**  
Submit to info@nucanorthtexas.com or NUCA NTX P.O. Box 331694, Fort Worth, TX 76163

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**JOB OWNER/PROVIDER OF THE YEAR NOMINEE:** \_\_\_\_\_  
 Public  Private Nominee's approximate annual utility work budget? \_\_\_\_\_

**Nominated By:** \_\_\_\_\_ **Company:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Award Nominee Information**

**ENTITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**REPRESENTATIVE:** \_\_\_\_\_ **PHONE:** (\_\_\_\_) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**PROJECT:** \_\_\_\_\_ **LOCATION:** \_\_\_\_\_ **PHASE:** \_\_\_\_\_

I. Provided project information: value, type, scope, schedule, complexity, challenges and or ease of completion and any additional relevant factors. Provide 2-4 original resolution pictures (email: info@nucanorthtexas.com) of the project.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. Provide relevant provider/owner details. These may include: vision for the community, commitment to: quality, safety, and infrastructure investment.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

III. Provide relevant details of interactions with utility contractors that set this provider/owner apart from others, for example: bid system, clarity of goals, prompt/easy payment, flexibility of schedule, ease of communication during project, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If additional .space is needed; add another sheet. Original resolution pictures (max 3) in jpg format are appreciated.  
Submit to info@nucanorthtexas.com or NUCA NTX P.O. Box 331694, Fort Worth, TX 76163

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**SAFETY AWARD - Application Form**

You must have a comprehensive (JSAs, PPE requirements, training criteria, covers all activities) **written safety program to be considered.** Submittals are confidential; reviewed by the Awards Committee Chair and Safety Awards Sub-Committee of NUCA of North Texas. Information will be held in strict confidence. Non-member, incomplete, or late applications will be disqualified. Questions? info@nucaorthtexas.com **Page 1 of 2**

**Contractor Member Company:** \_\_\_\_\_ **Nominated by:** \_\_\_\_\_

**Contact Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_ **Years in: Business/NUCA** \_\_\_\_ / \_\_\_\_

1. What is the date of your written program's last revision \_\_\_\_\_ **Please submit a copy of your table of contents.**
2. Does your company have a staff person responsible for monitoring safety? YES \_\_\_\_\_ NO \_\_\_\_\_  
If so, to whom does this person report to (Name/Title)? \_\_\_\_\_
3. **How many:** Foremen, supervisors, and managers / employees in your company? \_\_\_\_\_ / \_\_\_\_\_  
Attendees in the last 3 years at: 10 hour OSHA Construction Outreach Program? \_\_\_\_\_ 30 Hour? \_\_\_\_\_  
Certified Competent Person & Excavation, or Confined Space Safety Training? \_\_\_\_\_
4. Did your company receive any **Willful** \_\_\_\_\_, **Serious** \_\_\_\_\_, or **Repeat** \_\_\_\_\_ 2017 OSHA citations? \_\_\_\_\_ If so, indicate the number in each category and describe (use a separate sheet of paper if needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **Total number of:** Vehicle accidents? \_\_\_\_\_ Injuries from vehicle accidents? \_\_\_\_\_  
Do you have a Defensive Driving Fleet Safety Program? YES \_\_\_\_\_ NO \_\_\_\_\_  
Total number of Workers Compensation Claims in 2017. \_\_\_\_\_  
Describe the most serious 2017 claim; and what you have done to avoid future occurrences (use a separate sheet if needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **What is your company's:** Disabling (lost time) injury incident rate / Number of reportable accidents from your OSHA log?  
2015 \_\_\_\_\_ / \_\_\_\_\_ 2016 \_\_\_\_\_ / \_\_\_\_\_ 2017 \_\_\_\_\_ / \_\_\_\_\_
7. **Number of:** strikes / strikes for which your company was responsible? \_\_\_\_\_ / \_\_\_\_\_ You may briefly describe below:

\_\_\_\_\_  
\_\_\_\_\_

8. How has your company participated in NUCA safety programs/activities (sponsoring training/ instructor(s), participating in the safety committee, providing industry training, etc.), if so please describe involvement? (Answer on next sheet.)

