



# Gold Hammer Award Nomination Form

## Improvement Category:

Commercial       Residential       New Construction

(Public Buildings are not eligible)

Owner's Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Submitted by: \_\_\_\_\_

Phone: \_\_\_\_\_

Approximate date work began: \_\_\_\_\_

Approximate date work was completed: \_\_\_\_\_

## Type of work performed:

Rehabilitation (significant reconstruction work due to deterioration)

Renovation (existing building or structure remodeled and updated)

New Business

Additional Comments: \_\_\_\_\_

Submit to: City Clerk's Office, P.O. Box 1480, Fort Pierce, FL 34954

Email: [lcox@CityofFortPierce.com](mailto:lcox@CityofFortPierce.com); Questions Call 772.467.3065

