## Form IV: Project Team + Details

<u>Part 1:</u> Please complete the form below. The information submitted via this form will be used in Interior Design Awards communication materials. The Competition Organiser accepts no responsibilities for any omission or oversights made on this form.

Project Query					
Project Name:			Catego	ory:	
Project Location / Country:		Contact Person:			
Project Submission By (Firm Name):		Contac	ct Details:		
					Telephone
					Email

<u>Part 2:</u> Please provide more details of your project by furnishing us with the supplier name/brand of products used according to 18 pre-specified product categories below (where applicable) (at least 5 products).

Products Specified				
S/N	Product Categories	Supplier Name / Brand		
1	Curtain wall / Cladding			
2	Roof / Wall			
3	Floor / Floor coverings			
4	Paints / Coatings / Finishes			
5	Insulation / Energy saving			
6	Lifts / Escalators / Stairs			
7	Sealants / Adhesives			
8	Ceiling / Partitions / Building boards			
9	Doors / Window / Glazing hardware			
10	Security / Fire products			

11	Bathroom / Kitchens / Sanitary wares	
12	Lighting / Electrical equipment	
13	Heating / Ventilation / Air- conditioning	
14	Solar technology / Renewable energy	
15	Water management system	
16	Waste recycling system	
17	Greening / Planting	
18	Pre-fab construction materials	
19	Others (Please specify)	
20	Others (Please specify)	

I certify that the information provided is true and accurate to the best of my knowledge.

Sianed by	representative	e of Entran	t team:
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Name :

Address :

Phone :

Signature :

Please print out this form to sign, then scan, OR input your digital signature.

Date