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SERVICE PROVIDER SUBMISSION REQUEST

Contact Information:

Business Name:	
Contact Name:	
Address:	
City:	
State:	Zip code:
Phone:	
Fax:	
Email:	
Website:	

Business Profile:

How long has your organization been in business?
How many employees does your company have?
<i>Architects: How many registered architects work at your firm?</i>
How many preservation projects do you complete per year?
How many within the last five years?
What percentage of your projects would be considered historic preservation?

Please list 3-5 recent preservation projects and client names:

The remaining portion of your work is in what area?

Has your work received any preservation awards? If yes, please give award specifics.

The Illinois Restoration Resources guide does not represent paid listings. It is based, instead, on names received from an independent committee of preservation architects and other professionals. The committee will convene on a regular basis—in order to review new submittals and the ongoing performance of current listings.

Please include any supporting material with this form.