



**2003/2004 AIA
Directory of New York
City Architecture Firms**

Please complete all applicable items by typing in **upper and lower case** letters. Submit only one questionnaire per firm. We cannot be responsible for the legibility of handwritten material.

**Firm Listing Questionnaire
For Architect Members Only**

On behalf of:
AIA New York Chapter
200 Lexington Avenue
New York, NY 10016
Fax 212 696-5022

Return IMMEDIATELY to:
Dawson Publications, Inc.
2236 Greenspring Drive
Timonium, MD 21093
Fax 410 560-5601

All firm profiles from the 2002 Directory and Supplement are available at the Chapter's web site: www.aiany.org. Firms are encouraged to update their listing using the online update function to keep this data current and to eliminate typos.

Check Firm's Chapter: BROOKLYN BRONX NEW YORK QUEENS STATEN ISLAND

Firm Name:

Business Address – Street:

Suite #:

City:

State:

Zip Code:

Telephone ()

Fax ()

E-mail:

Web Address:

Year Firm Was Established:

Check if Firm Is Certified: WBE MBE

Other Offices (City, State or Country):

Firm Personnel by Discipline (Indicate number of employees for each discipline in your NY area office only)

Architects (Licensed Only)*:

Landscape Architects:

Administration:

Engineers:

Planning:

Other:

Interior Designers:

Other Technical:

Examples of Projects (Project Name • City • State, e.g., Trinity Church, New York, NY):

* Supplemental Dues must be paid for all architects whose firms are run by NY Chapter members.

**Please take the time to respond now. Firms not responding by May 16, 2003 will not be listed in the Directory.
Fax to: 410 560-5601 or send to: Dawson Publications, Inc., 2236 Greenspring Drive, Timonium, MD 21093; 800-322-3448.**



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Professional Services Listing Questionnaire

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I. NATURE OF BUSINESS SERVICES: (Check one only)

- | | | |
|---|--|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Environmental Consulting/Services | <input type="checkbox"/> Manufacturer's Rep |
| <input type="checkbox"/> Architectural Art/Crafts | <input type="checkbox"/> Food Facility Planner | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Asbestos Consulting/Removal | <input type="checkbox"/> Graphic Designer/Signage | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Business Management | <input type="checkbox"/> Graphics Supplier | <input type="checkbox"/> Pre-Construction Services |
| <input type="checkbox"/> Computer | <input type="checkbox"/> Insurance | <input type="checkbox"/> Publishing |
| <input type="checkbox"/> Consulting Engineers | <input type="checkbox"/> Interior Designer | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Construction/General Contracting | <input type="checkbox"/> Kitchen Consultant | <input type="checkbox"/> Reprographics |
| <input type="checkbox"/> Employment Agency | <input type="checkbox"/> Landscape Architect | <input type="checkbox"/> Roofing Consultants |
| <input type="checkbox"/> Energy Consulting | <input type="checkbox"/> Legal | <input type="checkbox"/> Specification Services |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Lighting Designer | <input type="checkbox"/> Sub-Contractor |

II. FIRM DATA:

Name of Firm

Street Address

City • State • Zip Code

Telephone ()

Fax ()

Web Address

E-mail

Client Contact

Key Person Completing Form (for verification of information)

Tel. ()

Check if your firm is a certified: WBE MBE

III. Please provide a 75 WORD MAXIMUM description of your firm's service or product on the following lines:

Do not type below this line!

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