



2010 Firm Questionnaire (Please print)

Complete Name of Firm \_\_\_\_\_

Complete Firm Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Year Firm Established \_\_\_\_\_

Firm Email \_\_\_\_\_ Firm Website \_\_\_\_\_

AIA Connecticut Principals of Firm: For additional space, please use reverse side.

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

Total personnel \_\_\_\_\_ Licensed Architects \_\_\_\_\_ Technical staff \_\_\_\_\_ Support staff \_\_\_\_\_

*The following information will be made available to no one except AIA Connecticut staff*

Full name of primary contact \_\_\_\_\_

Direct phone number of contact person \_\_\_\_\_ e-mail \_\_\_\_\_

Full name of marketing person \_\_\_\_\_

Direct phone number of marketing person \_\_\_\_\_ e-mail \_\_\_\_\_

**Only AIA Connecticut Member Firms will be published on the AIA Connecticut Website**

**Is this an AIA Connecticut Architecture Firm? (Licensed architects hold 66.67% of the ownership of the firm. ALL principals of the firm, having their primary office in Connecticut, are AIA Connecticut members.)**

**Yes \_\_\_\_\_ No \_\_\_\_\_**

**If yes, please continue. If no, it is not necessary to complete the remainder of this form.**

Areas of Expertise:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Adaptive Reuse                   | <input type="checkbox"/> Health Care/Labs/Research   | <input type="checkbox"/> Residential-Single Family Dwelling |
| <input type="checkbox"/> Airports                         | <input type="checkbox"/> Hotel/Convention Facilities | <input type="checkbox"/> Residential-Multi Family Dwelling  |
| <input type="checkbox"/> Athletic Facilities              | <input type="checkbox"/> Independent Reviews         | <input type="checkbox"/> Restaurants/Entertainment          |
| <input type="checkbox"/> Commercial/Office/Retail         | <input type="checkbox"/> Industrial Facilities       | <input type="checkbox"/> Roofing                            |
| <input type="checkbox"/> Consulting-Arbitration/Mediation | <input type="checkbox"/> Interior Architecture       | <input type="checkbox"/> Senior Assisted Living Facilities  |
| <input type="checkbox"/> Consulting - Codes               | <input type="checkbox"/> Landscape/Site Design       | <input type="checkbox"/> Sustainable Design                 |
| <input type="checkbox"/> Consulting - Expert Witness      | <input type="checkbox"/> Libraries                   | <input type="checkbox"/> Transportation Facilities          |
| <input type="checkbox"/> Correctional Facilities          | <input type="checkbox"/> Mixed Use Buildings         | <input type="checkbox"/> Universal Design                   |
| <input type="checkbox"/> Court Houses                     | <input type="checkbox"/> Model Making                | <input type="checkbox"/> Veterinary                         |
| <input type="checkbox"/> Custom Furniture                 | <input type="checkbox"/> Municipal                   | <input type="checkbox"/> Small Project Minimum= \$0         |
| <input type="checkbox"/> Daycare                          | <input type="checkbox"/> Museums                     | <input type="checkbox"/> Small Project Minimum=\$50,000     |
| <input type="checkbox"/> Educational Facilities           | <input type="checkbox"/> Planning/Urban Design       | <input type="checkbox"/> Small Project Minimum=\$100,000    |
| <input type="checkbox"/> Fire/Police Stations             | <input type="checkbox"/> Preservation/Renovation     | <input type="checkbox"/> Small Project Minimum=\$250,000    |
| <input type="checkbox"/> Gas Stations                     | <input type="checkbox"/> Religious                   |   |

**This form was completed by \_\_\_\_\_ Date \_\_\_\_\_**

**Signature required for processing**

*Please complete and return by mail or fax to AA Connecticut, 370 James Street, New Haven, CT 06513;203-562-5378.*

*Responses may be e-mailed to [pobrien@aiact.org](mailto:pobrien@aiact.org) with an electronic signature.*