

### INDIAN RIVER COUNTY CHAMBER OF COMMERCE 2024 INDUSTRY APPRECIATION AWARDS

### "VECOMPANY OF THE YEAR" NOMINATION FORM

All areas on this form MUST be completed and nomination signed (page 3)			
to be considered	<ul> <li>Please review Checklist on the last page</li> </ul>		

COMPANY NAME: (Please print or type) CEO or MANAGER'S NAME and T					
ADDRESS:					
OFFICE PHONE:	CELL PHONE:				
BUSINESS E-MAIL:					
NUMBER OF EMPLOYEES					
Total, company-wide:					
# of full-time	# of part-time		# of 1099		
Total, Indian River County only:					
# of full-time	# of part-time		# of 1099		
YEAR ESTABLISHED IN INDIAN F	RIVER COUNTY:				
WHAT INDUSTRY ARE YOU IN? (Must be a for-profit entity):					
PLEASE ATTACH A CO	PY OF YOUR CI	JRRENT B	USINESS LICENSE		

I. ESTIMATED ECONOMIC IMPACT

AVERAGE ANNUAL WAGE OF INDIAN RIVER COUNTY EMPLOYEES, EXCLUDING						
OWNERS. The county's average annual wage is \$54,317 (\$26.11/hour), not including						
bene	fits (check one below)					
	75% to 99.99% of county average annual wage (\$40,738 - \$53,774)					
	100% to 149.99% of county average annual wage (\$54,317 - \$80,932)					
	150% or more of county average annual wage (\$81,475+)					
ESTI	MATED PERCENTAGE OF ANNUAL PURCHASES MADE WITHIN INDIAN RIVER					
C	COUNTY:%					
SUC	CESS OF COMPANY WITHIN YOUR INDUSTRY:					
	Increased sales or revenue past year (%):					
	Increased market size past year (%):					
	Other industry or corporate awards received in past 5 years? Please list:					
	<b>IILITARY HISTORY</b> (this is for informational purposes only – not a voting riteria; information will be included as part of the award presentation)					
В	Branch of Service					
Ŷ	ears of Service (total - active and reserve)					
V	Wars/Conflicts					
N	ledals Awarded					
	ORPORATE CITIZENSHIP – Any additional info needed for Committee onsideration can be continued on additional sheets					
Your appli	company's local affiliations through membership or contribution – check each that					
	Chamber(s) of Commerce					
	Local/Regional Trade Associations (name them):					

Others (please list):	

Involvement in local charities (name them):					
Company's volunteerism in the community:					
months (cash/in-kind value):	ams, non-profits, and/or charities \$ NVIRONMENT/BENEFIT				
Retirement plan	Vision care	Employee discounts			
Medical	Flex-time	Continuing education			
Dental	Family leave	Employee recognition			
Other non-wage compe	ensation:				

#### NOMINATION SUBMITTED BY:

I verify that the submitted information is true and accurate to the best of my knowledge

Please review the Checklist on the next page prior to submission

Submit Completed form to: Indian River County Chamber of Commerce Economic Development Office 1216 21<sup>st</sup> Street, Vero Beach, FL 32960 Phone: 772-567-3491 - Fax: 772-778-3181 <u>helenec@indianrivered.com</u>

# PLEASE NOTE: Forms must be received by 5pm on Wednesday, July 31<sup>st</sup>, 2024 (preferably via email)

### The Industry Appreciation Awards Event is scheduled for Thursday, October 3<sup>rd</sup>, 2024

Award recipients will be notified in advance of the Awards Event, to make arrangements to attend Photos of the award recipients will be taken directly preceding the Awards Event and immediately following the event

### 2024 INDUSTRY APPRECIATION AWARDS NOMINATION FORM CHECKLIST

Did you remember to attach:

Copy of your business license

Company logo (in color, if possible)

Additional information on your company for the Committee to consider – awards, recognitions, positive peer reviews

## Thank you!