



FLEET MANAGER OF THE YEAR AWARD

Nomination Form

Nominee Information

Job Title:
Unit of Government:
Address:
City (North Carolina):
Daytime Phone Number:

Nominator Information

Title:
Unit of Government:
Date:
Daytime Phone Number:
Email address:

A narrative description must be included with each nomination form describing why the person is being nominated.

Please submit to justin.hix@highpointnc.gov

QUESTIONS

Contact:
Justin Hix
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Cell (336)471-5839
justin.hix@highpointnc.gov