

# LIGHTING DESIGN REQUEST



Date: \_\_\_\_\_ SPM: \_\_\_\_\_  
Project Title (CRM): \_\_\_\_\_ Partner/Integrator: \_\_\_\_\_  
Submitted By: \_\_\_\_\_ Installation Date: \_\_\_\_\_  
Crop Type: \_\_\_\_\_

Please complete one form for each unique space Forecast  Metric (m)  Imperial (ft)

## Structure Measurements

A sketch with dimensions is required for ALL REQUESTS

**Indoor**

Number of Rooms: \_\_\_\_\_  
Room Length: \_\_\_\_\_  
Room Width: \_\_\_\_\_  
Room Ceiling Height: \_\_\_\_\_

Note any obstructions in sketch

**Greenhouse**

Bay Length: \_\_\_\_\_  
Bay Width: \_\_\_\_\_  
Number of Bays: \_\_\_\_\_  
Truss Height: \_\_\_\_\_  
Truss Spacing: \_\_\_\_\_

## Bench/Rack Measurements

**Static**

**Rolling**

**Single Level**

**Multi Level**

Length: \_\_\_\_\_ Number of Rows: \_\_\_\_\_ Number of Tiers: \_\_\_\_\_  
Width: \_\_\_\_\_ Mobile Aisle Spacing: \_\_\_\_\_ Distance Between Tiers: \_\_\_\_\_  
Height: \_\_\_\_\_ Resting Position Spacing: \_\_\_\_\_ Height of 1st Tier (Off Ground): \_\_\_\_\_

## Lighting Needs

**Flower**

**Vegetative**

**Mother**

**Clone**

**Other\***

Desired Fluence Fixture: \_\_\_\_\_ Mature Crop Height: \_\_\_\_\_  
Desired Mounting Hardware: \_\_\_\_\_ Desired PPFD ( $\mu\text{mol}/\text{m}^2/\text{s}$ ): \_\_\_\_\_  
Desired Spectra: \_\_\_\_\_

## Electrical Specifications

**AC FLEX**

**DC FLEX**

**Electrical Power Limitation\***

Line Voltage: \_\_\_\_\_ Controller Type: \_\_\_\_\_ Indicate Controller  
Panel Mount (AFF): \_\_\_\_\_ Indicate Zoning Sketch Location in Sketch

## Notes:

\*Specify in Notes

Incomplete or improperly completed request forms will result in delays