



**LIGHTING LAYOUT
REQUEST FORM**

PLEASE NOTE: You **MUST** download this form *before* filling it out. Click "Sign" or "Fill & Sign" in the upper right corner of the toolbar and complete (depending on your version of Adobe Reader, you may be required to place a signature before you can save a completed form).

(*) DENOTES REQUIRED FIELD

*NAME:

*TODAY'S DATE:

*REQUESTED COMPLETION DATE:

*JOB NAME AND ADDRESS:

*EXISTING FIXTURE TYPE (at least one):

1.)

2.)

3.)

*EXISTING # OF FIXTURES:

*DESIRED # OF FIXTURES:

EXISTING FOOT CANDLES (if known):

*DESIRED FOOT CANDLES:

CEILING HEIGHT (if applicable):

*MOUNTING HEIGHT:

*ROOM DIMENSIONS:

PARKING LOT OR OTHER SPACE DIMENSIONS (if applicable):

*FIXTURE SPACING (at least one distance):

1.)

2.)

3.)

ADDITIONAL NECESSARY INFORMATION:

(e.g., Client wants more light, or Client wants maximum energy savings, etc.)

Signature: _____