



8312 N.Saulray St. - Tampa, FL 33604 / Ph:813-931-8423 - Fax:813-932-7879

## Request for Applications Support Services

Requested By: \_\_\_\_\_

Phone / Fax / Email Address: \_\_\_\_\_

Job Name/Description: \_\_\_\_\_

### Indoor Project Details:

Room Length: \_\_\_\_\_ Width: \_\_\_\_\_ Floor to Ceiling Ht.: \_\_\_\_\_

Work Plane Height: \_\_\_\_\_ Mtg. Ht. To Bottom of Fixture: \_\_\_\_\_

Reflectances: Ceiling: \_\_\_\_\_ Wall: \_\_\_\_\_ Floor: \_\_\_\_\_ (Typically 80/50/20)

Preferred Fixture: \_\_\_\_\_ Lamp Type/ Wattage: \_\_\_\_\_ (T8,T5,T5HO, etc)

Desired Average fc: \_\_\_\_\_ Maintained  Initial

Uniformity Ratio (Avg/Min) Criteria: \_\_\_\_\_

Task/Activity Performed: \_\_\_\_\_

### Outdoor Project Details:

Areas to be Illuminated Must be Clearly Marked or Noted.

Desired Average Fc: \_\_\_\_\_ Maintained  Initial

Uniformity Ratio (Avg/Min) Criteria: \_\_\_\_\_

Minimum Fc at Any Point: \_\_\_\_\_

Preferred Fixture: \_\_\_\_\_ Lamp Type: \_\_\_\_\_ (MH,HPS, CFL/PL,IND)

Estimate of Fixture Quantity (If Applicable): \_\_\_\_\_ Fixture Mounting Ht.: \_\_\_\_\_

Fixtures per Pole: \_\_\_\_\_ Pole Height: (with base) \_\_\_\_\_

Building Height: \_\_\_\_\_

Are pole locations fixed or can they be moved for optimal distribution? \_\_\_\_\_

Are there any special local ordinance requirements or restrictions? \_\_\_\_\_

**Note: If Autocad drawings supplied, please send as Autocad2000 version**  
**Please provide drawings in \*.dxf or \*.dwg format on disk or by Email when available**  
**If drawings/sketches are provided they must be to scale or have proper dimensions**

### Notes:

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