

Greenhouse Crops

Please provide us with the following information for a FREE lighting layout. In order to provide your project with an accurate and effective design please complete this form as thoroughly as possible. Missing information may cause delay in receiving your layout or affect accuracy/results.

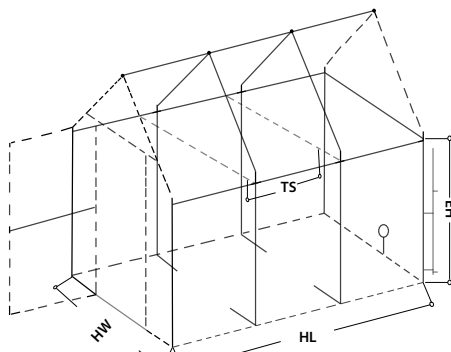
Project name:	Dealer company:
Job company:	Dealer location:
Customer contact:	Dealer contact:
Email:	Email:
Ship to ZIP code:	Phone:

Crop:				
Structure:	<input type="checkbox"/> Greenhouse	<input type="checkbox"/> Other	Roof:	<input type="checkbox"/> Arch <input type="checkbox"/> Gothic <input type="checkbox"/> Gable <input type="checkbox"/> Other

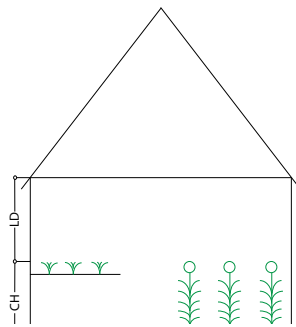


GREENHOUSE OR OTHER MEASUREMENTS:

# of Structures	Structure Width W	Structure Length L	Bottom of Truss/Eave Height H	Peak Height PH
# of Bays	Individual Bay Width W	Individual Bay Length L	Space Between Trusses TS	Bench + Crop Height CH



Structure Measurements



Crop Height

Obstructions:		
Partition between bays?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Material:		
Shade curtain?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, is it below the truss?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any other obstructions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please describe.		

BENCH MEASUREMENTS:

Vertical	Horizontal	Other
		<div style="border: 1px solid black; width: 100%; height: 100%;"></div>

# of Benches (per bay)	Bench Length BL	Bench Width BW
Bench Start BS	Aisle Space AS	Space from Wall WS

Please see page 2 for grid to submit a sketch of your bench layout with dimensions.

Orientation of Benches:	<input type="checkbox"/> Vertical	<input type="checkbox"/> Horizontal	<input type="checkbox"/> Other	Bench height from floor:	<input type="checkbox"/> Other
Bed/Bench Type:	<input type="checkbox"/> Stationary	<input type="checkbox"/> Rolling	<input type="checkbox"/> Ground Beds		

Light Request Form

LIGHT NEEDS

Light Requirements:	<input type="checkbox"/> Primary supplemental	<input type="checkbox"/> Photoperiod/Daylength extension
Growth Stage:	<input type="checkbox"/> Propagation	<input type="checkbox"/> Vegetative <input type="checkbox"/> Flowering
Uniformity Desired:	<input type="checkbox"/> High (may result in more fixtures)	<input type="checkbox"/> Low (may result in fewer fixtures)
Desired Intensity:	<input type="checkbox"/> Micromoles:	<input type="checkbox"/> Moles/Day:
		Natural+supplemental=
		Supplemental only=
<input type="checkbox"/> Not sure. Please base it on crop type and my region and focus on:		
	<input type="checkbox"/> High quality levels	<input type="checkbox"/> Good quality levels <input type="checkbox"/> Acceptable levels

FIXTURE INFORMATION

Fixture/Bulb Type:	<input type="checkbox"/> LED	<input type="checkbox"/> Double-Ended <input type="checkbox"/> HPS <input type="checkbox"/> MH	<input type="checkbox"/> CMH <input type="checkbox"/> 3100K <input type="checkbox"/> 4200K	<input type="checkbox"/> T5 Fluorescents	<input type="checkbox"/> Other
Voltage:	<input type="checkbox"/> 120V	<input type="checkbox"/> 208V/240V	<input type="checkbox"/> 277V	<input type="checkbox"/> 347V	<input type="checkbox"/> 480V <input type="checkbox"/> Other
Standard Plug:	<input type="checkbox"/> 5-15P	<input type="checkbox"/> 6-15P	<input type="checkbox"/> L7-15P	<input type="checkbox"/> L24-20P	<input type="checkbox"/> L8-20P <input type="checkbox"/> Other
Special Plug:	Describe:				
	All fixtures come with a standard 8' power cord.				

Please submit any architectural drawings you have of your facility. CAD files are preferred, followed by SketchUp and PDF files. Alternatively, please submit a sketch of your greenhouse and bench layout with your dimensions:

Fax completed form to 800-634-9906 or email to Commercial@Hydrofarm.com