Facility Lighting Service - General Lighting Inventory

Municipal Information	Facility Information		
Municipality:	**Facility Name:**		
Contact Name:	**Street Address:**		
Title:	**City:**		
Contact Phone:	**Postal Code:**		
Email:	**Hydro Company:**		
	Hydro Account:		
	Year Built:	**Floor space:**	**sq.ft. sq.m.**

Location	Existing Fixture Type	Lamp Wattage	Total # of Fixtures	Lamps per Fixture	Total Lamps	Annual Operating hours
[e.g. Foyer/Entrance Area/ Rink/garage/etc]	*[e.g. Metal Halide/High Pressure Sodium/ Fluorescent/ CFL/T5/T8/T12/etc]*					
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	

Facility Lighting Service - Large Space Lighting Inventory

Municipal Information	
Municipality:	
Contact Name:	
Title:	
Contact Phone:	
Email:	

Facility Information			
Facility Name:		**Seasonal?**	to
Street Address:		**Operating Hours:**	/year /month /week
City:		**Major Activity:**	
Postal Code:		**Secondary Activity:**	
Hydro Company:		**Current Light levels:**	Too Dim Adequate Too Bright
Hydro Account:		**Lighting Controls**	None Switch Timer Computer
Year Built:	**Floor Space:** sq.ft. sq.m.		

Lighting Zone/Area Details: (Fill out for each Lighting Zone/Area)

Size of Area

	Width	Length
Room		
Rink		
Pool		

Reflective ceiling installed	
Surface to Ceiling Height (Avg,Ft)	
Surface to Fixture Height (Avg,Ft)	

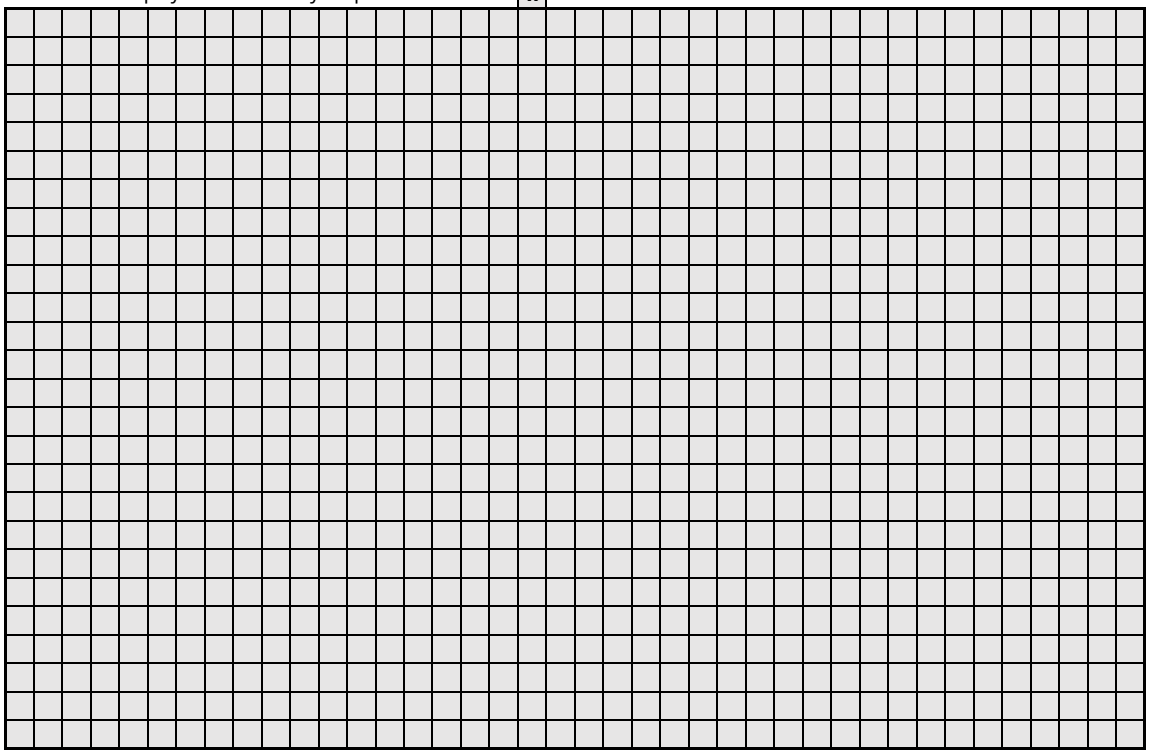
Fixture Layout

Rows	
Columns	

High-Bay Fixture/ Lamp Details

Total Quantity	
Type	
Lamps/fixture	
Lamp Wattage	
Fixture Voltage	
(if known) System Watts	

Can display **x** for fixture layout placements below **x**



Comments:

Please send completed forms to Christian Tham, Municipal Energy Specialist at ctham@amo.on.ca.