



Typical Spacing Layout

Date _____
 Rep Agency _____
 Contact _____
 Phone _____
 Email _____
 Job Name _____
 Need by Date _____ Time _____

Requirements

	Setup 1	Setup 2	Setup 3
Fixture (Diffuser, Lens or Lens Color)			
Fixture Type (as shown on plan or project)			
Bracket (Optional)			
Light Source (i.e. MH100)			
Distribution Type (i.e. T3 or T5)			
Optional Reflectors (i.e. HSS-90, FDR)			
Pole Height			

Design Criteria

Min (fc) _____ Max to Min Ratio _____
 Max (fc) _____ Avg to Min Ratio _____
 Avg.(fc) _____

Spacing Criteria

Pole setup _____ (Single Row, Staggered, Double Row)
 Distance Between Poles _____ feet (on same side of street)
 Length of Calculation Grid _____ feet
 Width of Calculation Grid _____ feet
 Street width _____ feet (between curbs)
 Sidewalk width _____ feet
 Sidewalk setback _____ feet (from curb)

Fax completed form to 281-997-5441