



LIGHT PLAN

REQUEST FORM

Business name _____

Contact name _____

Email _____ Phone _____ - _____ - _____

Business address _____

Mailing address _____

Today's date ____/____/____ Expected order delivery date ____/____/____

Operating voltage in greenhouse _____ Available amperage _____

Crops/cultivars to be grown under LEDs _____

Crops genus/height _____

Current light source _____

Current light intensity _____

Do you have restrictions for running LEDs for 18-20 hours? _____

Do you have specific objectives (pigmentation, early flowering, etc.)? _____

Please return this form to us by emailing to insidesales@hortamericas.com and we will reply within 72 hours.

Contact name _____

GREENHOUSE SPECS

Are you filling this out in meters or feet? Check one: meters feet

Size of Greenhouse: _____ L / _____ W / _____ H

Number of bays to be lit _____

How many walkways bisect the length of the greenhouse? _____

- Select one application: 1. Supplemental lighting for floor crops
(See options illustrated) 2. Supplemental lighting for bench crops
 3. Sole-source lighting

A. Bay width _____

B. Floor to truss _____

Floor to shade/energy curtain _____

BENCH MEASUREMENTS

Select one: Rolling benches Stationary benches

C. Floor to top of bench _____

D. Floor to top of crop _____

E. Bench width _____

F. Bench length _____

G. Walkway width _____

H. Distance between bench and right wall _____

Distance between bench and left wall _____

I. Floor to top of crop _____

J. Number of layers _____

K. Distance between top of shelf to bottom of shelf _____

L. Distance between two racks _____

M. Width of racks _____

N. Top of crop to bottom of shelf _____

O. Distance between rack and wall _____

P. Length of rack _____

