

## Vining Crops (tomatoes, cucumbers, hops, etc.)

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.

Droinet nam	201				Dool	) × 601	<b>~~~~</b>							
Project name:						Dealer company:								
Job company:						Dealer location:								
Customer contact:						Dealer contact:								
Email:						Email:								
Ship to ZIP code:						Phone:								
Crop:														
Structure:	☐ Greenho	ouse	☐ Othe	er	Roof:	<b>□</b> A	rch	☐ Gothic		Gable	☐ Other			
									/	^				
GREENHOU	SE OR OTH	IER MEASU	REMEN	TS:										
# of Structures	s Stru	cture Width <b>V</b>	Structure Leng	Structure Length <b>L</b>		Bottom of Truss/Eave Height <b>H</b> Peak I				Height <b>PH</b>				
# of Bays	Indiv	vidual Bay Wid	dth <b>W</b>	Individual Bay Length <b>L</b>		Spa	Space Between Trusses <b>TS</b>			Bench + Crop Height CH				
				^			Obstrue	ctions						
								on between bay:	- 2		☐ Yes	☐ No		
1		-XX \					Materia		o:		u res	□ NO		
- 1		, / 'i	\					curtain?						
											Yes	□ No		
T T T T T T T T T T T T T T T T T T T						\		is it below the tr	obstructions?		☐ Yes	□ No		
											☐ Yes	☐ No		
, in		HL	+				п усэ, р	olease describe		) Julia Cit	<u> </u>			
Build	ding Specific	cations		Crop Heig	ght									
Total Number o Crop Rows	of Plant W Heigh	it	: Height <b>PH</b>	Blackout Height	Single	e I	Double		<u></u>					
									\ /					
House Width <b>HW</b>	Wire Spa WS		Aisle Spacing AS	Block Space BS	4			HMA HA						
					Cva	ns ne	er Row	HB	WS	AS	BS			
Please see paa	ne 2 for arid t	o submit a sk	etch of v	our bench layou						HW'				
	· · · · · · · ·	- 300 w 311												
Does your fir	rst row of cro	ops start aga	inst the v	vall? 🔲 Yes		No								
Crops per row:   Single						☐ Double								
		First row of	crops be	gins:	ft f	rom s	ide wall			ft from	end wall			
Fax complet	ed form to	800-634-99	06 or em	ail to Commer	cial@Hvdi	rofarr	n.com							

## **Light Request Form**

LIGHT NEEDS											
<b>Light Requirements:</b>	☐ Primary s	upplemental	☐ Photoperiod/Daylength extension								
Growth Stage:	☐ Propagat	ion	☐ Vegetative		☐ Flowering						
Uniformity Desired:	☐ High (may result in	n more fixtures)	Low (may result in fewer	fixtures)							
Desired Intensity:	☐ Micromo	les:	☐ Footcandles:		☐ Moles/Day:						
				Na	Natural+supplemental=						
				Sup	Supplemental only=						
☐ <b>Not sure.</b> Please base it o											
	☐ High qua	lity levels	☐ Good quality lev	rels 🔲	☐ Acceptable levels						
FIXTURE INFORMATION	_	_									
Fixture/Bulb Type:	☐ LED	☐ Double-Ended☐ HPS☐ MH	☐ Single-Ended ☐ HPS ☐ MH	☐ CMH ☐ 3100K ☐ 4200K	☐ T5 Fluorescents	☐ Other					
Voltage:	□ 120V □ 208V/240V		□ 277V	<b>□</b> 347V	☐ 480V	☐ Other					
Standard Plug:	□ 5-15P □ 6-15P		☐ L7-15P	☐ L24-20P	☐ L8-20P	☐ Other					
Special Plug:	Describe:										
	All fixtures c	All fixtures come with a standard 8' power cord.									
SE HID Lens required:	☐ Yes										
Please submit any archite and PDF files. Alternative											

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

