

ECO Parking Tech QUICK LIGHTING ASSESSMENT Form

Project Name:
Official address (of garage):
Submitted by (Name/Company):
Contact info (email and cell phone):
Description and need:
Entry lighting type 1 and wattage (attach pictures):
Parking Deck lighting type 2 and wattage (attach pictures):
Top Deck lighting type 3 and wattage (attach pictures):
Stairwell lighting type 4 and wattage (attach pictures):
Quantity of each type: Type 1 Type 2 Type 3 Type 4
Valet or Self Park Garage?
Utility provider (name):
Taxable or non-taxable:
Number of parking spaces (covered) if known:
Conduit - Recessed or Surface mounted (attach picture):
Parking deck fixtures – Surface mounted or mounted by pendant (attach picture):
Is entry well-lit or special requests:
Sketch of lighting pattern with estimated dimensions: