

Farm Name: _____

Lighting

Building: _____ Area: _____

Infrequent use Regular use [estimated house use per day _____]

Lighting Type: (M designates magnetic ballast, E designates electronic ballast)

- | | | | | |
|--|-------------|-----------|--------------|--|
| <input type="checkbox"/> Incandescent | _____ watts | no. _____ | | <input type="checkbox"/> warm, <input type="checkbox"/> cold |
| <input type="checkbox"/> Fluorescent (compact) | _____ watts | no. _____ | | <input type="checkbox"/> warm, <input type="checkbox"/> cold |
| <input type="checkbox"/> Fluorescent (T-12-M) | _____ watts | no. _____ | length _____ | <input type="checkbox"/> warm, <input type="checkbox"/> cold |
| <input type="checkbox"/> Fluorescent (T-8-E) | _____ watts | no. _____ | length _____ | <input type="checkbox"/> warm, <input type="checkbox"/> cold |
| <input type="checkbox"/> Fluorescent (T-5-E) | _____ watts | no. _____ | length _____ | <input type="checkbox"/> warm, <input type="checkbox"/> cold |
| <input type="checkbox"/> Mercury vapor | _____ watts | no. _____ | | <input type="checkbox"/> warm, <input type="checkbox"/> cold |
| <input type="checkbox"/> Metal halide | _____ watts | no. _____ | | <input type="checkbox"/> warm, <input type="checkbox"/> cold |
| <input type="checkbox"/> High pressure sodium | _____ watts | no. _____ | | <input type="checkbox"/> warm, <input type="checkbox"/> cold |

Building Sketch:

(note footcandle level on sketch if appropriate)

