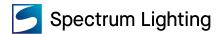
Project Location (State):



Rep Name:

SALES OPPORTUNITY DESIGN REQUEST

All Applicable Information Must Be Entered to Assess Opportunity

| Project Name: | Project Quote / Type : | |
|---|---------------------------------------|-----------------------|
| Quotes / Sales Lead: | Special Requirements (If applicable): | |
| | | |
| Must Attach Cross Over Product Spec (Visual Aid): Attached | | |
| Summary E-Mail of Requirements Must Be Attached Prior to Review of Opportunity: | | Attached |
| Potential Project QTY: | Project Budget (Per Luminaire): | |
| Date: | Est. Delivery Time of Project: | |
| Date: | Est. Delivery Time of Project: | |
| | | |
| Application: Indoor Outdoor Other: | | |
| Light Source (Static Unless Specified): | | |
| Approx. Lumen Output (Calculated Source Lumens Unless Specified): | | |
| Nominal Beam Distribution (If applicable): | KELVIN/CCT (80 CRI unless Specified): | |
| Dimming Protocol: | Voltage: | |
| Fixture Finish (If applicable): | Trim Finish (If applicable): | Lens (If applicable): |
| | | |
| | | |
| Mounting (Please include lengths) / Finish: | | |
| Comments (If applicable): | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Is this going into an existing housing? Yes No | | |
| Comments (If applicable): | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Please note this form will be sent for internal review of the opportunity. This may take up to 5 business days. Once opportunity has been reviewed and approved, a SPECxxxxxx SKU will be assigned for quoting purposes. A submittal drawing will be provided within 5 business days following initial opportunity review. Please review all notes and specifications that are on the drawing that Spectrum Lighting has produced. Please note that once the drawing is sent for review, the customer is to sign off on the submittal drawing. If customer adds additional notes / revisions, it may void their signature and require a new revised drawing and /or quote. Custom fixtures are non- returnable.