



Stand-Alone Solar Lighting System Sizing Worksheet

Please complete the worksheet below. If you need assistance please call 1-800-310-7413 x-108. Email worksheet to paul@NSTsolar.com

Company/Gov't Agency

Name

Address

City State/Province Zip/Postal Code

Country

Email

Telephone Fax

Project Site Information

Closest Major City State/Province Country

Latitude(If Known) Longitude(If Known)

Snowfall (Yes/No) Average Snowfall

Highest Temperature Lowest Temperature

Lighting Application Information

Type of Area To Be Lit: Parking Lot Roadway/Street Walkway Fence Line/Gate Building Perimeter

Other (Please Explain):

Portable Lighting System Required OR Stationary(Pole Mounted) System Required OR Other (Please Explain):

Light Fixture Type Desired (If Known):

Do You Require A Pole To Be Supplied By NST: Yes/No If Yes, Do You Want It Direct Burial OR Anchor Base

Days of System Battery Reserve Desired (If Known):
(2 Days is Generally the Minimum)

Lighting System Run Time

Light Run Time Requirement: Dusk to Dawn 2 hours 4 Hours 6 Hours 8 Hours 10 Hours
(Starting at Dusk) (Starting at Dusk) (Starting at Dusk) (Starting at Dusk) (Starting at Dusk)

OR

Split Run Times: 3 hours/1hour 4 hours/2 hours 6 hours/2 hours
(ON at Dusk/OFF/ON Prior to Dawn)

OR

OTHER(Please Explain):

Project Requirements

Number of Systems
(If Known)

Date Quote Is Needed

Corrosive Environment (Salt Air)? Yes/No

Do You Need A Photometric Layout? Yes/No

Other Comments, Special Requirements