

Crownlite Mfg. Corp.

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In order for us to quote on any of our Motion Sensor fixtures, we need the following information. Please circle the appropriate configuration.

Confirmation is needed in order to proceed (photocopy this sheet for each different application or area):

Date: _____ Your Company: _____ Job Name: _____
Contact: _____ Phone: _____

1. All configurations ELB, <10% THD, and <1.7 CCF, based on F32T8 lampping.
 - a. Units will be Ultrasonic unless otherwise specified.

2. Wiring configurations (What is the standby mode of operation?):
 - a. Separate Ballast (50% in standby mode)
 - i. One lamp on all the time, Second lamp on/off with sensor
 - b. Step Dimmer
 - i. One or two lamps 30% (2lt 28w Bf .27) on in standby mode / 100% (2lt 62w .88Bf) on with sensor
 - c. Step Dimmer
 - i. One or two lamps 60% (2lt 45w Bf .58) on in standby mode / 100% (2lt 62w .88Bf) on with sensor.
 - d. Step Dimmer
 - i. One or two lamps 50% (2lt 37w Bf .48) on in standby mode / 100% (2lt 62w .88Bf) on with sensor.
 - e. Step Dimmer
 - i. One or two lamps 5% (2lt 13w Bf .05) on in standby mode / 100% (2lt 62w .88Bf) on with sensor.
 - f. One ballast (1 or 2 lamps)
 - i. One or two lamps All off in standby mode / 100% (2lt 62w .88Bf) on with sensor.
 - g. All lamps off in standby mode, 100% (2lt 58w .88Bf) on with sensor
 - h. Other configurations are available, consult factory for verification.

3. What is the application? _____ Ceiling or Wall mounted?

Hallway _____
Stairway _____
Open Office _____
Other _____

- B. What are the dimensions of the room or space: W x L x H? Mounting height of fixture?
- C. Are there known obstructions to the sensor's field of view?

- D. What is specified (or, do you have a preference)?
 - a. Infrared _____
 - b. Ultrasonic _____
 - c. Dual technology _____

- E. Is there an emergency pack? _____

- F. What is the lampping (number and type)? _____

- G. What is the voltage? _____

Thank you,

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