Residential Lumen Calculation Sheet

"Inspiring a Vibrant Community"

Project:_____ Date:_____

Site Address:_____

Project Coordinator:_____ Phone:_____

Cottonwood Zoning Ordinance (Sec. 408), "Outdoor Lighting Code"

The information below is accurate (to be signed by Project Coordinator): _____

PLEASE ATTACH THE FOLLOWING:

- Photometric data sheets or manufacturer's product description for all "**S**" type (shielded) fixture combinations showing photometric description to verify upward light control characteristics, All other fixtures will be considered unshielded, or "**U**" class luminaries. Mercury vapor lamps are prohibited.
- Site plan indicating placement of each fixture.

SITE ACREAGE = _____

LESS ACRES FOR

RIGHTS-OF-WAY-_____

NET ACRES=_____

SITE MAXIMUM FOR UNSHEILDED LUMEN [X 3,300]

SITE MAXIUMUM FOR ALL LUMEN [X 10,000]

LIGHTING INVENTORY

List information below for each fixture to be used for outdoor illumination (existing and proposed). Use the following Abbreviations:

Lamp Type:	Shielding Type:
LPS Low Press Sodium	**S** Shielded
HPS High Press Sodium	**U** Unshielded
MH Metal Halide	See "Definitions under Sec. 408 for clarification regarding shielding.
HL Halogen	
IN Incandecent	
FL Fluorescent	

FIXTURE REFERENCE NUMBER (from attached site plan) AND USE/PURPOSE	CANOPY SIZE (if applicable)*	LAMP TYPE & SHIELDING	WATTS	CORRELATED COLOR TEMPATURE (CCT)/ KELVINS (3000K OR LESS)	INITIAL LUMEN (see reverse)	QTY. UNITS	SUB-TOTALS S LUMEN	SUB-TOTALS U LUMEN	TOTALS*

GRAND TOTALS NOT TO EXCEED SITE MAXIMUMS ABOVE. [ ] [ ]

Staff Review

Approved By:
Date:
Sheet_____of____

***Gas St. Canopies:** All fixtures to be flush mounted. Lumen SUBTOTALS not to exceed 40 lumen/sq.ft. Lumen TOTALS to be divided by 2 (count only 50%)

Ball fields and outdoor display areas which exceed 100,000 lumen per acre: I hereby certify that lighting associated with related facilities described above is no greater than minimum luminance levels for the activity recommended by the IESNA.

_____ Signature of Lighting Engineer

_____ Arizona Registrant's No.