



# Lighting Projects Cover Sheet

\_\_\_\_\_ Date

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Employee ID

\_\_\_\_\_  
Branch Number

## Customer Contact Information

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Company Address

\_\_\_\_\_  
Company City

\_\_\_\_\_  
Company State

\_\_\_\_\_  
Company Zip

\_\_\_\_\_  
Company Phone

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Contact Phone

\_\_\_\_\_  
Contact Email

## RFQ Details

\_\_\_\_\_  
Complete Project Name

\_\_\_\_\_  
Project's Address

\_\_\_\_\_  
Project's City

\_\_\_\_\_  
Project's State

\_\_\_\_\_  
Projects's Zip

\_\_\_\_\_  
Due Time

\_\_\_\_\_  
Specifier

\_\_\_\_\_  
Due Date

## Supporting Documents and Information

Yes  No  Are Equals Allowed?

Yes  No  Is the Title Block Attached?

**Required**  Are the Specifications Attached – Lights?

**Required**  Are the Specifications Attached – Controls?

**Required**  Is the Fixture Schedule Attached?

**Required**  Are the Contractor Counts Attached?

Comments & Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_