



Off-Grid Solar Lighting Checklist

Date: _____

Contractor _____

Company Address _____ Phone/Email _____

Electrical Supply House _____ Branch & Salesman _____

Client Address _____ Phone _____

City _____ Zip _____

Fixture Wattage _____

Fixture Voltage _____

Days of Autonomy _____
(days in which there may be no sun)

Pole Height _____

Light Footcandle (ft.) _____

Pole Width _____

Pole Design Round Square

Shade on array? No Yes

Enclosure Mounting

Top Middle Bottom Any

Panel Mounting Top Side Any

ROOF (if applicable)

Rafter Size **Rafter Spacing**

2 X 4 12"

2 X 6 18"

2 X 8 24"

_____ _____

Roof Pitch **Roof Type**

Flat Comp

2:12 Spanish Tile

3:12 Flat Tile

4:12 S Tile

5:12 Standing Seam

_____ _____

Roof Orientation _____

Roof Condition _____

Enclosure Mounting Sample Images

Middle/Bottom Mount



Top Mount



Panel Mounting Sample Images

Top



Side

