

PROJECT REFERENCE   
PROJECT POSTCODE   
(IMPORTANT FOR EXTERNAL WINDAGE CHECKS)  
DATE SUBMITTED

BUDGET   
DATE REQUIRED

CONTACT NAME   
CONTACT EMAIL   
ADDRESS   
  
TELEPHONE

SCHEME  INSTALLATION HEIGHT   
MAX. HEIGHT

TYPE OF DRAWINGS ATTACHED  DWG (preferred)  Sketch complete with ALL dimensions  
 PDF

SCALE (if unknown, ensure all measurements marked)  NO. OF PHOTOS ATTACHED

DESIRED LUX LEVELS (LEAVE BLANK FOR DEFAULT/CIBSE RECOMMENDED)

LUX LEVEL 1  LOCATION 1   
LUX LEVEL2  LOCATION 2   
LUX LEVEL3  LOCATION 3

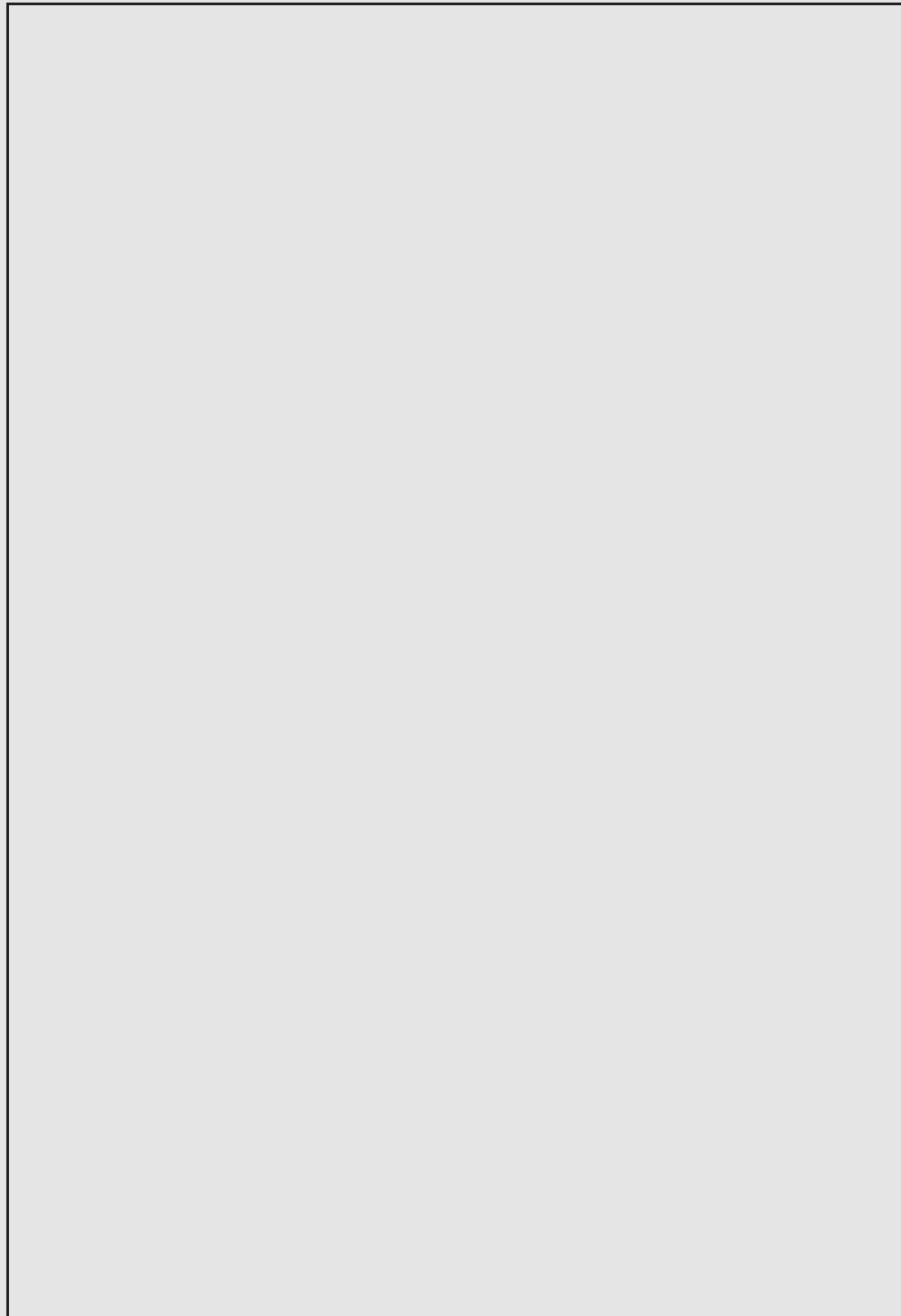
(NOTES/COMMENTS)

Return by email to sales@theledstore.co

**SCHEME TEMPLATE SKETCH**

- 1. Please ensure ALL dimensions in red are complete**
- 2. Please ensure existing or preferred installation locations are marked with an X**

Height of Install (either existing or preferred. If left blank, we will select the best height for aesthetics) \_\_\_\_\_



Length

\_\_\_\_\_

Width \_\_\_\_\_

**Return by email to sales@theledstore.co**