Lighting Performance: Tennis
Horizontal

Date of Readings:_____By:_____

School Name: _____ Seating Capacity:_____

School Contact: _____

Telephone:_____ Email: _____

Facility Name: _____

Facility Address: _____ City, State, Zip: _____

Recommended average light levels: 50 footcandles
Recommended uniformity: 2.0:1

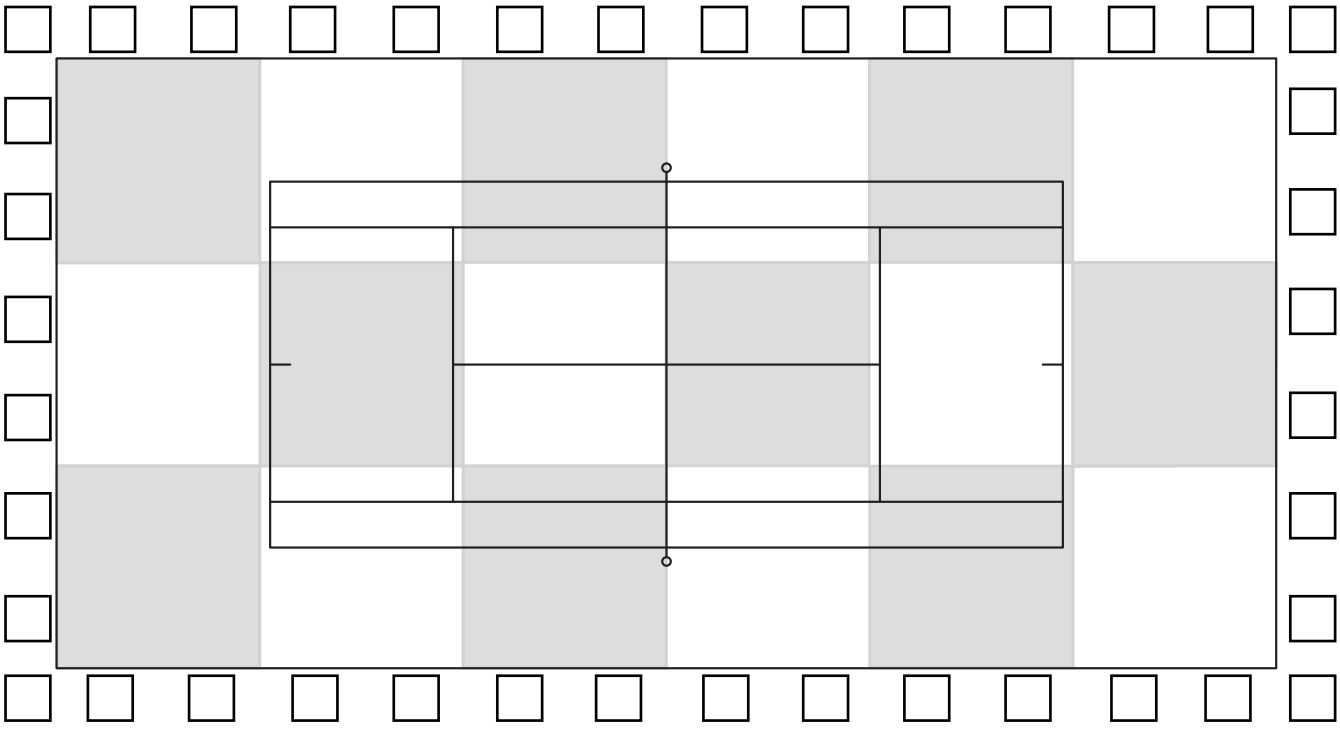
Mark your approximate pole locations around the field to the right, if applicable with an "X".

The form will auto fill light level calculations if used electronically.

If calculating manually:
Add the grid point readings and divide by the number of total grid points to get your light level average.
Divide the highest reading by your lowest reading to get your uniformity.

Court Orientation:
(Please indicate court orientation in cells around diagram to the right.)

Court #:_____



Horizontal Light Level and Field Survey Results:			
Average light levels:	_____	How is system controlled:	_____
Uniformity:	_____ :1	Date lighting system installed:	_____
(If outdoor) Quantity of poles:	_____	Lighting manufacturer:	_____
Field size:	_____	Relamp / maintenance date:	_____
Total number luminaires:	_____	Maintenance performed by:	_____
Number luminaires operational:	_____	Annual hours of operation:	_____
Luminaire type (HID or LED):	_____	Light meter brand:	_____
Lamp wattage:	_____	Model number:	_____
		Calibration date:	_____

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