LED/SSL LM82 TEST REQUEST

Date

Choose or type the information in each field * Required Fields			
CUSTOMER INFORMATION			
*Company		*P.O. Number	
*Address		*Phone	
*City		Fax	
*State/Province	Postal Code	E-mail	
*Country		*Contact	
LUMINAIRE DESCRIPTION			
*I main aire T ma		Click to insert a pic	ture of the luminaire to test
*Luminaire Type			
*Manufacturer			
*Model Name			
*Catalogue Number			
*Lens/Diffuser			
*Collimators			
ELECTRICAL INPUT		LED DESCRIPTION	N
*Type		*Manufacturer	
*Nominal Input * Volta	age * Wattage	*Catalog Number	
DRIVER Int	tegrated 🗌 Internal 🔲 External	*Test Position	
*Manufacturer		*Color (CCT)	
*Catalog Number		*LED Drive Curren	t
LM82 TEST REQUEST			
□LM79 Sphere Test @ 25°C □ Board temperature + 25°C □ Board temperature + 50°C □ Optional Temperature			
LUMINAIRE DISPOSAL (Shipping cost at customer fees)			
Return After Testing Hold for further Testing Customer Pickup Scrap			
SPECIAL INSTRUCTIONS			
N.B: Additional service charge of 40% for priority testing in 48 hours. YES			
APPROVAL			
	Target Due Date		