

Jaffrey Streetlight Survey

Jaffrey
Energy
Committee 2008

Page

Record No _____ Street and Number _____

Date of
Installation: _____

Type:

Pole No

Watts:

Lumens:

Team:

Inspection Date:

Recommendation:

Description of locaton if not clear from address

Is light at an
intersection? yes no

Check here if
light is off: lightout

Notes: (e.g. special characteristics of intersection, proximity to/overlap withe other lights or private lighting, reason for recommendation.)