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## LIGHTING PROJECT CHECKLIST

This checklist shall be completed prior to the commencement of any project at a BCC owned and/or maintained location that involves lighting equipment and/or lighting systems that contribute to at least \$3,000 of the total project cost. Completed checklists and lighting design documents shall be sent to [LightingProjects@colliergov.net](mailto:LightingProjects@colliergov.net) at least two (2) business days prior to commencement of work.

Design Professional/Contractor Name(s): \_\_\_\_\_

County Project Manager(s): \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Location(s): \_\_\_\_\_

Please indicate the lighting areas that this project will encompass using the checkboxes below:

Outdoor Lighting       Indoor Lighting       Specialty Lighting\*

*\*Specialty Lighting in this context refers to the areas described in the Lighting Standards Special Considerations Guidebook.*

Please attest in the spaces below that the Design Professional/Contractor has reviewed the Collier County Lighting Standards sections applicable to the project and will abide by the standards.

- Design Professional/Contractor Signature: \_\_\_\_\_
- Date Reviewed by Design Professional/Contractor: \_\_\_\_\_

Please indicate in the spaces below the Collier County CMO division(s) that have reviewed the lighting design for this project.

\_\_\_\_\_

Date Checklist Was Submitted: \_\_\_\_\_

### Collier County Approvals

Approver #1 Name: \_\_\_\_\_ Approver Signature: \_\_\_\_\_

Approver Division: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Approver #2 Name: \_\_\_\_\_ Approver Signature: \_\_\_\_\_

Approver Division: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Approver #3 Name: \_\_\_\_\_ Approver Signature: \_\_\_\_\_

Approver Division: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Approver #4 Name: \_\_\_\_\_ Approver Signature: \_\_\_\_\_

Approver Division: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_