



## PROJECT QUESTIONNAIRE

## star ceiling

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

Project Location: \_\_\_\_\_

Approximate Install Date: \_\_\_\_\_

Project Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Project Type: (Check One)

Commercial

Residential

Ceiling Height: \_\_\_\_\_

Ceiling Type: (Check One)

Drywall

T-Bar

Exposed

No. of stars per square foot: (Check One)

1

2

3 (standard)

\_\_\_\_\_

Dimming/Dousing Requirements: (Check One)

On/Off

Dimming/Dousing

Twinkle/Color Requirements: (Check One)

Static White

Twinkle White

Continuous Color

DMX Controlled Twinkle

DMX Controlled Color

Sketches or Drawings (must be included on separate sheet or email file):

- Plan layout of ceiling showing dimensions and all possible illuminator locations