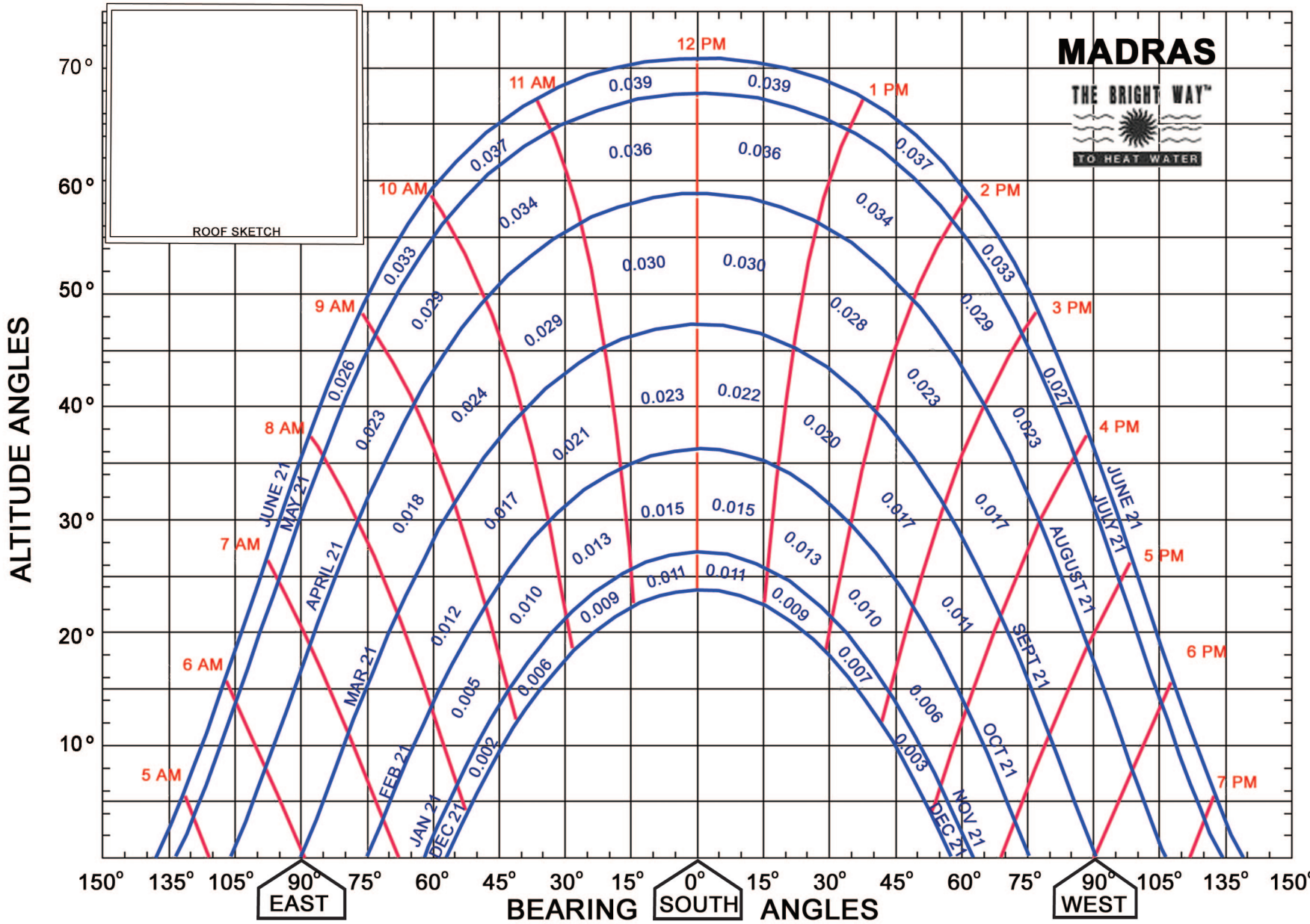

SOLAR WATER HEATER PROGRAM

JOB NAME: _____

SITE ADDRESS: _____

CHART BY: CONTRACTOR NAME: _____ DATE: _____

CONTRACTOR REP. _____ INITIAL: _____

VERIFIED BY: UTILITY REP. _____ INITIAL: _____

DATE: _____ COLLECTOR ORIENTATION _____ DEGREES E OR W

VIEWED FROM: _____

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PRIME SOLAR FRACTION

HOUR	8 - 9	9 - 10	10 - 11	11 - 12	12 - 1	1 - 2	2 - 3	3 - 4	SUB TOTAL		TOTALS
SOLID SHADING											
PARTIAL SHADING										+ 2	
										1.00	

PRIME SOLAR FRACTION