



GROWER-CULTIVATOR PROJECT ASSESSMENT

COMPANY INFORMATION

COMPANY NAME	
PROJECT NAME	
PROJECT ADDRESS	
CONTACT NAME	
CONTACT PHONE	
CONTACT EMAIL	

TYPE OF OPERATION:

- Indoor
 Outdoor
 Greenhouse
 Hemp
 Cannabis
 Hops
 Other

BRIEFLY DESCRIBE PROJECT:

SOURCE OF WATER:

- Water Well
 Municipal
 Lake/Pond
 Ditch Water
 Trucked In
 Other

AVAILABILITY OF WATER:

How many Gallons Per Minute/Hour? _____ GPM _____ GPH

Has the source been tested to be consistent in the above measured yield? Yes No

If Yes, by Whom? _____

HOW MUCH WATER IS AVAILABLE?

_____ Acre per Foot _____ Year _____ Month _____ Day
 _____ Cubic Foot _____ Year _____ Month _____ Day

QUALITY OF WATER:

What is the General Quality of the Water Source? _____

_____ PH _____ Solids _____ Sand _____ Organic Material

Do you have or will you need storage tanks?

Have? Yes No

Need? Yes No

Is there a pump? Yes No

If Yes, please provide the following:

Horsepower _____ Manufacturer _____ Model Number _____

What is the Electrical Supply Availability?

Voltage: _____ 120 Volt _____ 230 Volt _____ 460 Volt _____

Amperage: _____ Circuit Breaker Fuse

Phase: _____ Single _____ Three

FIELD INFORMATION

How many acres is the field? _____

Are there elevation changes in the field? Yes No

If Yes, how much? _____ Up or Down from the water source? _____

How wide is the field? _____ How long is the field? _____

What is the row spacing? _____

What is the plant spacing within the row? _____

How many gallons per day to each plant? _____

Are you planting in the ground or in containers? _____

What is your planting media? _____ Soil _____ Coco _____ Rockwool _____ Custom Blend

If you're planting in containers, what size are they? _____

What type of container? _____

If you're planting in the ground, have you amended you soil? Yes No

If yes, with what? _____

Do you need Injection? Yes No

If yes, for what?

_____ PH _____ Nutrients (Teas) _____ Other

What are you planting?

Seeds Clones Mature

How are you planting?

Cultivator By hand

IRRIGATION GENERAL INFORMATION

What type of Irrigation are you interested in?

Subsurface Drip Irrigation Point Source Drip Irrigation Overhead Irrigation Propagation Irrigation
(Misters/Foggers)

Do you want Manual or Automatic Operation of you Irrigation? _____

Are you interested in Soil Moisture Sensors? Yes No

Do you have quality WiFi available? Yes No

Notes: _____

The information shown on this document will be relied on to determine needed materials and for irrigation system design purposes. By signing below you agree that the information shown in this document is true and correct can be relied on for those purposes. CPS cannot be held responsible for in accurate materials lists or design errors related to incorrect information provided in this document.

Printed Name: _____

Signature: _____

Date: _____

**Once complete, please email to:
kimseyd@cpsdistributors.com, williamsj@cpsdistributors.com, and felpsb@cpsdistributors.com**