



SOLAR PERMIT APPLICATION

Building and Site Information			
Project address:			
Map & tax lot #:			
Subdivision:	Addition:	Lot:	Block:
Owner name:		Owner phone:	
Owner address:			
City		State	Zip code
Project Description			
Value of all work: \$		<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial
Scope of work description:	<input type="checkbox"/> Photovoltaic <input type="checkbox"/> Thermal <input type="checkbox"/> Pole Mount	_____ KVA _____ # of circuits	
Primary Contact Person			
The primary contact is the person who receives all communication and emails. For eBuild projects, the primary contact needs to be added as a Partner to your project so that they will receive all communications and emails regarding this project. You can add members to your project through the Manage page in eBuild.			
Name (please print):		Primary phone:	
Company:		Alternate phone:	
Address:			
City		State	Zip code
E-mail:			
Contractor Information			
General Contractor		Plumbing Contractor	
Contact name:		Contact name:	
Company name:		Company name:	
Phone:	Fax:	Phone:	Fax:
E-mail:		E-mail:	
CCB#:		CCB/BCD#:	
Electrical Contractor		Mechanical Contractor	
Contact name:		Contact name:	
Company name:		Company name:	
Phone:	Fax:	Phone:	Fax:
E-mail:		Email:	
CCB/BCD#:		CCB#:	
Signing supervisor's license #:			
Print name of signing supervisor:			
Signature of signing supervisor:			
OFFICE USE ONLY			
Plan Review R _____	Intake	Permit Approval	
	Fees:	Fees Due:	
	Date:	Date:	
	Cashier:	Approved by:	

Permit # _____

Related #s _____