

CITY OF FULLERTON

SOLAR PERMIT APPLICATION WORKSHEET

PLEASE PRINT

PROJECT ADDRESS:		SUITE:	Tidemark #:		
USE OF BUILDING: (circle one)	RESIDENTIAL	COMMERCIAL	INDUSTRIAL	OTHER	MASTER ID#
NATURE OF WORK (circle one):		SOLAR P.V. SYSTEM	SOLAR WATER HEATING/COLLECTOR SYSTEM	OTHER	
JOB DESCRIPTION (including service upgrade if required) :					

NUMBER OF PANELS: _____			SYSTEM KWA: _____		
BUILDING OWNER'S NAME:				PHONE NO:	
ADDRESS:		CITY:		STATE:	ZIP:
TENANT'S NAME (Comm/Ind):				PHONE NO:	
CONTRACTOR'S NAME:		STATE CONTR. #:	LICENSE CLASS:	PHONE NO:	
ADDRESS:		CITY:		STATE:	ZIP:
WORKERS COMP. POLICY#:	EXP. DATE:	INSURANCE COMPANY:		FULLERTON BUS. LIC. #:	
ARCHITECT/ENGINEER:		STATE LICENSE #:	PHONE NO:		
ADDRESS:		CITY:		STATE:	ZIP:
CONTACT NAME:			PHONE NO:		
E-MAIL ADDRESS:					

FIRE CLASS: _____

BLDG. FEE \$ _____

OCC. GROUP: _____

P/C FEE PD \$ _____

TYPE OF CONSTR: _____

VALUATION: \$ _____

SUBMITTAL DATE: _____

FLOOD ZONE: _____

PROCESSED _____

PLANNING OK TO CHECK & DATE: _____ BUILDING APPROVAL DATE: _____