



SOLAR (PV) SYSTEM PERMIT WORKSHEET

COMMUNITY DEVELOPMENT DEPARTMENT

1400 Highland Avenue, Manhattan Beach, CA 90266-4795
 Telephone (310) 802-5500 FAX (310) 802-5501 TDD (310) 546-3501

Permit #: _____

Date: _____

Reviewed By: _____

Job Address:	<input type="radio"/> Residential	<input type="radio"/> Commercial
Property Owner:	Phone: _____	
	Email: _____	
Applicant:	Phone: _____	
	Email: _____	
Contractor:	Phone: _____	
	Email: _____	
CSLB License No:	City License No: _____	

Permit Type:	<input type="radio"/> STAND ALONE	<input type="radio"/> RELATED TO CONST.	<input type="radio"/> REVISION	<input type="radio"/> OTHER
BASE INFORMATION		NOTES		
# OF PANELS/MODULES:				
K.W:				
NEW SUB-PANEL (AMPS): <i>REQUIRES A SEPARATE PERMIT</i>				
UPGRADE SERVICE PANEL (AMPS): <i>REQUIRES A SEPARATE PERMIT</i>				
# OF DISCONNECTS:				
# OF INVERTERS:				

Applicant Acknowledgement Statement
 I hereby acknowledge that I have read the application and state that the information I have provided is correct and agree to comply with all City Ordinances, State Regulations, and the provisions and conditions of any permit issued pursuant to this application. I understand that inspection and approval by the City Building Inspector is required. I also understand that the permit will expire if the building or work authorized is not commenced within 180 days from date of permit issuance or if work is suspended or abandoned any time after work is commenced for a period of 180 days.

Signature: _____ **Date:** _____

CITY USE ONLY		
PLAN CHECK AND INSPECTION FEE	4480	
RELATED ELECTRICAL	4025	
IMAGING FEE	4017	
AFTER-THE-FACT FEE	4000	
OTHER		
TOTAL FEES		