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Ryan Pruett
Director

Solar Energy System Permit Application
(For Installation, Alteration, or Expansion of Solar Panel Systems)

1. Project Information

Job Address: _____

Job Valuation: _____

Type of Permit (check all that apply):

- ☐ New Solar Installation ☐ System Alteration / Upgrade ☐ Battery Storage Addition
☐ Repair / Replacement

Type of Work:

- ☐ Residential ☐ Commercial
-

2. Property Owner Information

Owner's Name: _____

Mailing Address: _____

City/State/ZIP: _____

Phone: _____ **Email:** _____

3. Contractor / Installer Information

Business Name: _____

License # / Type: _____

Mailing Address: _____

City/State/ZIP: _____

Phone: _____ **Email:** _____

Primary Contact / Supervisor On Site: _____

4. Electrical Details

Utility Company: _____

Interconnection Type: ☐ Grid-Tied ☐ Off-Grid ☐ Hybrid

Main Service Panel Rating (Amps): _____

Proposed Solar Inverter Capacity (kW): _____

Number of Inverters: _____

Number of Meters: _____

5. Structural / Building Details

Mounting Type: ☐ Roof-Mounted ☐ Ground-Mounted ☐ Carport / Canopy
☐ Other: _____

Existing Roof Material: _____

Roof Pitch: _____ **Orientation (Azimuth):** _____

Racking Manufacturer & Model: _____

Total System Weight (lbs): _____ **Weight per sq. ft.:** _____

6. System Description

Total Number of Panels: _____

Panel Manufacturer & Model: _____

Panel Wattage: _____ W

Total System Output: _____ kW (DC)

Battery Storage (if applicable):

Manufacturer / Model: _____

Battery Capacity: _____ kWh **Voltage:** _____ V

Description of Work:

7. Required Documents (attach to application)

- ☐ Electrical one-line diagram
- ☐ Structural drawings and load calculations
- ☐ Site plan with array location and setbacks
- ☐ Contractor's state license and building license

8. Certification & Acknowledgment

I hereby certify that the information contained in this application is true and correct, and that all work will conform to the **City of Columbus Electrical and Building Codes**, the **National Electrical Code (NEC)**, and all other applicable ordinances.

Applicant's Signature: _____ **Date:** _____

Print Name: _____

9. Office Use Only

Permit No.: _____

Date Received: _____

Approved By: _____

Date Approved: _____

Permit Fee: \$_____ **Receipt #:** _____

Comments: _____