

City Staff Use Only
Application Complete ___ Yes ___ No
 Check one
 City Staff Initials _____ Date _____

**CITY OF WINTERS BUILDING DIVISION
 SUBMITTAL CHECKLIST: SMALL RESIDENTIAL
 ROOFTOP SOLAR ENERGY SYSTEM**

Name of Project _____ Permit #: _____

Address/Location _____

Contact Person _____ Phone Number _____

E-mail _____ Fax Number _____

Number of Copies	RESIDENTIAL - <input type="checkbox"/> ROOF TOP SOLAR 10 KW AC OR 30 KW THERMAL OR LESS	Date Received	Received By
1	OWNER / BUILDER VERIFICATION FORM		
Read Statement	Prior to submitting the application the applicant shall verify to the applicant's reasonable satisfaction through the use of standard engineering evaluation techniques that the support structure for the small residential rooftop solar energy system is stable and adequate to transfer all wind, seismic, dead and live loads associated with the system to the building foundation.		
Read Statement	Prior to submitting the application the applicant at the applicant's cost and not using a City Building Inspector shall verify to the applicant's reasonable satisfaction using standard electrical inspection techniques that the existing electrical system including the existing line, load, ground and bond wiring as well as main panel and subpanel sizes are adequately sized based on the existing electrical system current use, to carry all new photovoltaic electrical loads.		
1	BUILDING PERMIT APPLICATION FORM.		

Applicant (Print) _____

Applicant (Signature) _____

Date _____