

Community Development Department Building & Safety Division 14177 Frederick Street P.O. Box 88005 Moreno Valley, CA. 92552- 0805 (951) 413-3350 (951) 413-3363 Fax www.moval.org

SOLAR BUILDING PERMIT APPLICATION

Permit#		

STREET ADDRESS:			Unit #:		
TYPE OF PERMIT: □ Commercial / Industrial		☐ Residential	Residential		
DESCRIPTION OF WORK:	☐ Ground Mounted	☐ Roof Mounted	☐ 2 nd System being added		
Kw Size # of Modules/Panels IF SYSTEM UNDER 10KW ATTACH CHECKLIST		.s	VALUATION: \$		
ELECTRIC SERVICE PROV	IDER: Southern Californi	☐ Southern California Edison (SCE) ☐ Moreno Valley Utility (MVU)			
IS THERE A PANEL UPGRA	NDE? Yes (If so separate ap	☐ Yes (If so separate application required) ☐ No			
	ECTRIC SERVICE EQUIPMENT? so separate application required)		attery Storage System Box (If so provide Manufacturer specs)		
PV Interconnection @ Center Fed	MSP? (If so, load calcs, fault study and en	gineer stamp is required)	☐ End Fed ☐ Supply Side		
IS THE ROOF TILE?	☐ Yes (If so, roof calcs a	are required)	No		
OWNER / TENANT					
Name:					
Business Name:					
Office #:	Mobile #:	Email:			
APPLICANT/Permit	Runner Same as: D] Owner/Tenant * □ A	rchitect * 🗆 Engineer * 🗆 Contractor		
Business Name:		Name of Contact:			
Mailing Address:					
Office #:	Mobile #:	Email:			
CONTRACTOR	Owner-Builder: [] Yes □ No			
Business Name:			Contact:		
Mailing Address:					
Office #:	Mobile #:	Email:			
State Contractor's Licen	se #: Cla	ass:	City Business License #:		