



Eligibility Checklist for Expedited Solar Photovoltaic Permitting for One- and Two-Family Dwellings

GENERAL REQUIREMENTS

- | | | |
|--|----------------------------|----------------------------|
| A. System size is 10 kW AC CEC rating or less | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| B. The solar array is roof-mounted on one- or two-family dwelling or accessory structure | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| C. The solar panel/module arrays will not exceed the maximum legal building height | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| D. Solar system is utility interactive and without battery storage | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| E. Permit application is completed and attached | <input type="checkbox"/> Y | <input type="checkbox"/> N |

ELECTRICAL REQUIREMENTS

- | | | |
|--|----------------------------|----------------------------|
| A. No more than four photovoltaic module strings are connected to each Maximum Power Point Tracking (MPPT) input where source circuit fusing is included in the inverter | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| 1) No more than two strings per MPPT input where source circuit fusing is not included | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| 2) Fuses (if needed) are rated to the series fuse rating of the PV module | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| 3) No more than one noninverter-integrated DC combiner is utilized per inverter | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| B. For central inverter systems: No more than two inverters are utilized | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| C. The PV system is interconnected to a single-phase AC service panel of nominal 120/220 Vac with a bus bar rating of 225 A or less | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| D. The PV system is connected to the load side of the utility distribution equipment | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| E. A Solar PV Standard Plan and supporting documentation is completed and attached | <input type="checkbox"/> Y | <input type="checkbox"/> N |

STRUCTURAL REQUIREMENTS

- | | | |
|---|----------------------------|----------------------------|
| A. A completed Structural Criteria and supporting documentation is attached (if required) | <input type="checkbox"/> Y | <input type="checkbox"/> N |
|---|----------------------------|----------------------------|

FIRE SAFETY REQUIREMENTS

- | | | |
|--|----------------------------|----------------------------|
| A. Clear access pathways provided | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| B. Fire classification solar system is provided | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| C. All required markings and labels are provided | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| D. A diagram of the roof layout of all panels, modules, clear access pathways and approximate locations of electrical disconnecting means and roof access points is completed and attached | <input type="checkbox"/> Y | <input type="checkbox"/> N |

Notes:

1. These criteria are intended for expedited solar permitting process.
2. If any items are checked NO, revise design to fit within Eligibility Checklist, otherwise permit application may go through standard process.
3. You may submit electronically by emailing solarpermitting@ci.marina.ca.us the following information:
 - a. Completed Building Permit Application
 - b. Completed Eligibility Checklist
 - c. 11 x 17 Plan Set (signed by designer)
 - d. 8.5 x 11 Manufacturers Specifications



CITY OF MARINA BUILDING PERMIT APPLICATION

FOR OFFICE USE ONLY

City of Marina – Building Department
211 Hillcrest Avenue
Marina, CA 93933
(T) 831-884-1214
(F) 831-384-0425

DATE: _____
APP/PERMIT # _____
REC'D BY: _____

PLEASE PRINT CLEARLY AND FILL THIS FORM OUT ENTIRELY (FRONT & BACK)

PROJECT ADDRESS: _____ **Marina, Ca** **APN #** _____
NEAREST CROSS STREET: _____
CONTACT PERSON: _____ **PHONE #** _____ **EMAIL:** _____

PROPERTY OWNER

ARCHITECT DESIGNER ENGINEER

NAME: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE #: _____ FAX #: _____
EMAIL ADDRESS: _____
TENANT COMPANY NAME: _____

LICENSE/REGISTRATION #: _____
NAME: _____
COMPANY NAME: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE #: _____ FAX #: _____
EMAIL ADDRESS: _____

APPLICANT:

OWNER-BUILDER

AGENT

CONTRACTOR

Owner-Builder/Agent Info:

NAME: _____
PHONE #: _____ FAX #: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
EMAIL ADDRESS: _____

Contractor Info:

NAME: _____
PHONE #: _____ FAX #: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
LICENSE #: _____ LICENSE CLASS: _____
CITY BUSINESS LICENSE #: _____

DESCRIPTION OF WORK: (Please fill-in and mark all that apply) NONRESIDENTIAL RESIDENTIAL

CONSTRUCTION VALUATION: \$ _____

I have contacted M.B.U.A.P.C.D. (Monterey Bay Unified Air Pollution Control District # (831)-647-9411)

Written Notification Submitted **Written Notification Not Required**

- | | | | |
|---|--|--------------------------------------|--|
| <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> ADDITION | <input type="checkbox"/> ALTERATION | <input type="checkbox"/> DEMOLISH |
| <input type="checkbox"/> REMODEL | <input type="checkbox"/> FIRE SPRINKLERS | <input type="checkbox"/> SIGN | <input type="checkbox"/> FOUNDATION ONLY |
| <input type="checkbox"/> TENANT IMPROVEMENT | <input type="checkbox"/> SWIMMING POOL/SPA | <input type="checkbox"/> FIRE REPAIR | <input type="checkbox"/> OTHER |

Description/Scope of Work: _____

Type of Construction: _____ **Occupancy Group:** _____ **Zoning:** _____

DESCRIPTION OF BUILDING: (Please fill-in and mark all that apply)

- | | | | | |
|--|---|-------------------------------------|---|--|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> Duplex | <input type="checkbox"/> Store | <input type="checkbox"/> Accessory Building | <input type="checkbox"/> City/County Owned |
| <input type="checkbox"/> Multi Family | <input type="checkbox"/> Apartment Building | <input type="checkbox"/> Industrial | <input type="checkbox"/> Office/Bank/Professional | <input type="checkbox"/> Medical Building |
| <input type="checkbox"/> Townhouse | <input type="checkbox"/> Restaurant | <input type="checkbox"/> Church | <input type="checkbox"/> Other _____ | |

Building Area: _____ Sq. Ft. Building Height: _____ Ft. Stories: _____
Existing: Floor Area _____ Garage _____ Other _____ # of Units _____
Proposed: Floor Area _____ Garage _____ Other _____ # of Units _____
Number of Bedrooms: _____ Number of Bathrooms _____ Total Number of Rooms: _____

Physical Address: 209 Cypress Avenue, Marina, CA 93933

CALIFORNIA LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

Contractor Signature: _____ **Date:** _____

OWNER-BUILDER'S DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

I, as owner of the property, or my employees with wages as their sole compensation, will do all of or portions of the work, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.

I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law).

I am exempt from licensure under the Contractors' State License Law for the following reason:

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: <http://www.leginfo.ca.gov/calaw.html>.

Property Owner or Authorized Agent signature: _____ **Date:** _____

DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).

Lender's Name and Address _____

The EPA Renovation, Repair and Painting (RRP) Rule requires contractors receiving compensation for most work that disturbs paint in a pre-1978 residence or childcare facility to be RRP-certified firms and comply with required practices. This includes rental property owners and property managers who do the paint-disturbing work themselves or through their employees. For more information about EPA's Renovation Program visit <http://www.epa.gov/lead> or contact the National Lead Information Center at 1-800-424-LEAD (5323).

An EPA Lead-Safe Certified Renovator will be responsible for this project
Certified Firm Name: _____ Firm Certification Number: _____

No EPA Lead-Safe Certified Firm is required for this project because: _____

DECLARATION BY BUILDING PERMIT APPLICANT

By my signature below, I certify to each of the following:

I am a California licensed contractor or the property owner* or authorized to act on the property owner's behalf**

** requires separate verification form **requires separate authorization form*

I have read this building permit application and the information I have provided is correct.

I agree to comply with all applicable city and county ordinances and state laws relating to building construction.

I authorize representatives of this city or county to enter the above-identified property for inspection purposes.

Signature: _____ **Date:** _____