



**EXPEDITED PERMITTING APPLICATION
(Small Residential Rooftop Solar System only)**

**COMMUNITY DEVELOPMENT DEPARTMENT / BUILDING DIVISION
8130 Allison Avenue, La Mesa, CA 91942
Phone: (619) 667-1176 • Fax: (619) 667-1380**

DATE OF APPLICATION: _____ PERMIT APPLICATION NUMBER: _____
PROJECT STREET ADDRESS: _____
SUITE OR UNIT NUMBER: _____ ASSESSOR'S PARCEL NUMBER: _____ - _____ - _____

The Eligibility Checklist for Expedited Permitting, Structural Criteria and System Summary must be completed and included in the electronic submittal.

Photovoltaic System Description: _____

ELECTRICAL SERVICE: Is service replacement proposed? Yes No Added Amps: _____ A, Total Amps: _____ A

• Applicant Information:

Name: _____ Phone: _____
Address: _____ Fax: _____
City: _____ State _____ Zip _____ Email: _____

• Owner Information:

Name: _____ Phone: _____
Address: _____ Fax: _____
City: _____ State _____ Zip _____ Email: _____

• Electrical Engineer Information (when applicable):

Name: _____ Engineer License Number _____
Business Name: _____ Phone: _____
Address: _____ Fax: _____
City: _____ State _____ Zip _____ Email: _____

• Contractor Information:

Name: _____ Phone: _____
State License Class and No: _____ Fax: _____
City Business License No: _____ Email: _____
Address: _____
City: _____ State _____ Zip _____

NOTE: STATE LAW REQUIRES THAT THE CONTRACTOR MAINTAIN ADEQUATE WORKERS COMPENSATION INSURANCE COVERAGE, WHEN REQUIRED. A BUILDING PERMIT CANNOT BE ISSUED UNTIL SUCH REQUIRED INSURANCE IS VERIFIED. OWNER/BUILDERS MUST COMPLETE AN OWNER-BUILDER VERIFICATION FORM.

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