

City of Auburndale

Permit#:

Solar Photovoltaic Permit Application

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Site Address	:										
Parcel #:						Zoning Class:					
Property Owner Name:							Email:				
Full Address:							Phone:				
COA Contractor #:						Qualifier Name:					
Qualifier Phone:						Qualifier Email:					
Description of	of Work:				•						
							Contract Amount (\$):				
Photovoltaic System Information (Check all that apply)											
Photovoltaic System Water Heater						Pool Heater			Roof Mou	ınt	
Ground Mount Batterie			Batteries	Off-Grid			Ge	Generator Grid Tie			
Location	Mai	in Build	ing	Accessory Building		Gara	ige	Agricultura	al Building	Other	
Utility Connection Yes N			: No	DC Input Voltage Range:				Max Sys	stem Voltage:		
Open Circuit Voltage:				Short Circuit Current			Voltage at Pma				
Max. Series Fuse Rating:			<u>'</u>	Current at Pmax:			# of Modules:				
# of Series:		# of Optin	mizer/Micro Inverte	r:	# of Para			rallel Source Circuits:			
Operating Voltage:			Оре	Operating Current:			Min. PV Source Circuit Ampacity for Conducto Sizing:				
Solar Water Heater PV Po			owered Pump Listing:				FSEC Approval/Listing:				
Solar Pool Heater FSEC Approva			Approval/	al/Listing:			Storage Tank Capacity:				
Relief Line Termination Point:				MFG Install Instructions:							
permit. I agree ordinances, bui understood that null and void. A upon completio Additional docu I hereby certify of either and ha	that this Iding code t any devi- Iso, the pr n of all ap ments ma that the in ve been a	applicates, and ation from the applicable ap	ion is subjuction is subjuction the info will not be of inspection the Site plan on set forth	er permit to do the weet to being built as ances of the City of rmation contained he eccupied or used until s. and Checklist. See we above is true and contained to make this applicate	referen Auburr rein, ur after a ww.au	nced to ndale ar nless ap n Letter o	the approved laws of opproved by of Completing	ed plans an the State of the Building on or a Cert	nd in accordance f Florida applica Inspector, will r tificate of Occup	e with all zoning able thereto. It is render the permit pancy is acquired	
Applicant Name						nnanv.					

Date:

Phone:

Revised: September 2021

Signature:

Email: